

**A Case Study of Curriculum Implementation:
Change, Loss and Grief in *'Health and Physical Education
in the New Zealand Curriculum'***

Ainslee Claire Coates

Thesis submitted in partial fulfilment of the requirements
of the degree of Master of Teaching and Learning,
Christchurch College of Education

July 2003

ABSTRACT

This thesis explores two teachers' perspectives and practice through making explicit the various discourses they operated in. By exploring these discourses, teachers may be able to understand the ways they conceptualise curriculum and consider how their own practices in the classroom are informed by and reflect particular beliefs. It is hoped that through this process opportunities exist to explore new ways of working that ultimately benefit children in classrooms.

The purpose of this study is to investigate how change, loss and grief as a relatively new learning context in *Health and Physical Education in the New Zealand Curriculum* (Ministry of Education, 1999) is conceptualized and implemented in the classroom. The perspectives and practice of two primary school teachers were used in a case study design to explore how this particular aspect of health education is implemented.

The process of teaching and learning is extremely complex and exploring it brought many challenges. The various discourses that seemed to guide, shape and determine the case study teachers' classroom practice are examined. The dominant discourse of the teacher as an 'expert' was pervasive and was illustrated in many of the teachers ideas, beliefs and practices. This discourse seemed to work implicitly to influence the way that these teachers conceptualized change, loss and grief and how they then implemented this topic in the classroom.

The implications of this study highlight the crucial role of specific and focused professional development in enabling teachers to recognize and critique their own practice within their existing teaching and learning belief systems. Through this process, teachers may be able to explore new teaching pedagogy that could challenge the existing and dominant discourses that operate in the classroom. The study raises questions about the effectiveness of existing professional development programmes in changing classroom practice and suggests some specific strategies that may more effectively close the gap between theory and practice.

ACKNOWLEDGEMENTS

This thesis is dedicated to my husband Glen who has provided me with the support, encouragement and love to enable me to complete this project whilst still retaining my sense of humour!

It is also dedicated to my parents Graham and Jenifer who have encouraged me in all of my endeavours and who supported me to gain my first tertiary qualification more than ten years ago.

My special thanks go to my supervisors Dr Gillian Tasker and Missy Morton at the Christchurch College of Education. Without their continued support, guidance and constructive feedback, I would not have been able to complete this task. I would also like to acknowledge the generous support from the Christchurch College of Education who as my current employer, have provided me with the necessary resources and support to achieve this goal.

Many thanks also to the two case study teachers who welcomed me warmly into their classrooms and teaching world. Thank you for your honesty, openness and willingness to participate in the study.

CONTENTS

Abstract	ii
Acknowledgements	iii
1. Introduction	1
2. Literature Review	4
2.1 Health Education	4
2.2 Teaching and Learning in Health Education	8
2.3 Curriculum Implementation	11
3. Methodology	19
3.1 Case Study	20
3.2 The Research Setting	20
3.3 Ethical Issues	21
3.4 Sources of Data	21
3.5 Data Collection	22
3.6 Data Analysis	25
4. Analysis of Findings	29
4.1 Teachers' Perspectives of Change, Loss and Grief	29
4.2 Teaching and Learning Within a Health Education Context	36
4.3 Curriculum Implementation	48
5. Discussion and Conclusion	53
5.1 Key Themes and Implications	53
5.2 Limitations of the Study	59
5.3 Implications for My Practice	60
5.4 Questions for Further Research	60
Bibliography	62
Appendices	
1 Interview Questions	68
2 Two Paradigms of Health Education	70
3 Letters of Information and Consent Forms	71
4 The Planned Curriculum: Jan's Unit Plan	74
5 The Planned Curriculum: Hazel's Unit Plan	79

CHAPTER 1

INTRODUCTION

This study explores some of the discourses that teachers negotiate and operate within when implementing a unit of work on change, loss and grief in the classroom. The study consists of several aspects; teacher's perspectives of change, loss and grief as a learning context within *Health and Physical Education in the New Zealand Curriculum (1999)*, a description of the planned and enacted curriculum that teachers negotiate during the teaching of a unit of work, and a discussion of issues that may shape teachers involvement or movement within a particular discourse.

The study arose out of a professional interest to explore how teachers implement an aspect of health education in the classroom setting. Alongside my interest in *how* teachers implement curriculum, was a desire to investigate gaps between what is intended to occur in the classroom and what actually does occur and *why*. As a facilitator of teacher professional development, I am interested in working with teachers to ensure that the implementation of health education in the classroom is as effective and beneficial for children as possible. With these interests and goals in mind, the specific research questions posed for this study include:

- 1. What are teachers' perspectives of change, loss and grief?**
- 2. What do teachers perceive as key issues in implementing this aspect of the *Health and Physical Education in the New Zealand Curriculum* (Ministry of Education, 1999)?**
- 3. How is a unit of work about change, loss and grief implemented in the classroom? What happens in practice?**
- 4. What are the implications for teacher professional development?**

The decision to study the implementation of change, loss and grief was influenced by the relative recency of this topic as a learning context heralded by its inclusion in the *Health and Physical Education in the New Zealand Curriculum* (Ministry of Education, 1999). In 2002 I was also involved with the Ministry of Education Exemplar Project for Health and Physical Education and as part of this, chose to work alongside a teacher gathering evidence of student

learning in change, loss and grief. This proved to be a powerful learning experience for me and illustrated first hand the significant potential that this unit has for students' learning and personal growth, if implemented effectively. The following reflection highlights the experience and insights I gained through being a part of the Exemplar Project.

Jon (not the students real name) had lost his mother to cancer in 2000. Since that time Jon had avoided discussing his loss or openly grieving for his mother. Jon's father was concerned for him and was extremely supportive when made aware that a unit of learning in change, loss and grief was to be implemented in the classroom. During the first two days of lessons when the words 'change' and 'crisis' were discussed, Jon withdrew and was visibly upset. His body language revealed his discomfort; head in his hands, shoulders hunched, tears and a reluctance to participate with others. Some of the other students were unsure how to react to Jon in this state but were reassured by the teacher that Jon was grieving, that his grief was O.K and that he would be supported. One of Jon's friends sat next to him to provide physical closeness and the teacher talked to Jon about his feelings at the end of each lesson. On the third day, Jon's tears abated and he became willing to participate. He shared his ideas with the group and I was impressed with his insightful and honest contributions particularly when he spoke of keeping loved ones in your heart as a strategy for coping with grief. Jon went on to confidently share his ideas in several video clips as part of the Exemplar Project; a sign of tremendous personal growth and depth of learning that had been achieved by a skilled teacher who had created a safe classroom environment and an effective teaching and learning experience.

(Personal reflection on a Professional Development Experience: 2002)

This experience strongly influenced my commitment to change, loss and grief as a learning context and my belief in its potential for significant learning in both students and teachers. The present study has affirmed my desire to explore current teacher beliefs and practices in change, loss and grief so that I as a teacher educator, may be better able to facilitate professional development programmes which provide opportunities for powerful and safe learning experiences in the classroom.

This thesis is organised around five chapters. **Chapter 2** highlights some of the literature that has informed and underpinned the study in relation to health education, teaching and learning

and curriculum implementation. Change, loss and grief as a learning topic is conceptualised and explored within the broader field of health education in order to provide a setting for the research study and a context for considering effective teaching and learning approaches in the classroom. Literature on curriculum implementation focuses on the importance of the teacher as a key decision maker and highlights the factors that affect implementation. Professional development as one key strategy for developing teachers' knowledge and teaching capability to implement curriculum is also explored, with existing practices challenged and alternative approaches suggested.

Chapter 3 describes the methodology, methods and processes used for the research including the sources and selection of data, ethical issues, data collection and analysis. A discourse framework is used as part of the data analysis to organise the data and assist with analysis.

Chapter 4 describes an analysis of the study's findings using three key themes organised around the research questions. The themes include teachers' perspectives of change, loss and grief, teaching and learning within a health education context and curriculum implementation. These themes illustrate and help to explain teachers' ideas, beliefs and practices about change, loss and grief and its implementation in the classroom.

Chapter 5 summarises the key themes from the previous chapter and highlights the implications that have emerged from the study in relationship to broader issues indicated in the literature. The limitations of the research process are discussed, implications for my own practice are described and questions for further research are suggested.

CHAPTER 2

LITERATURE REVIEW

This chapter will explore the three broad areas of literature into which the study fits; health education, teaching and learning, and curriculum implementation. Within health education the concept of health will be explored including a discussion of change, loss and grief as a learning context. Current teaching and learning approaches in health education are described, with a discussion of how these approaches have been applied to learning in change, loss and grief. The literature on curriculum implementation explores previous research perspectives adopted, types of curriculum, factors affecting curriculum implementation and professional development as a key strategy to build teacher capability in the classroom.

2.1 Health Education

This section will explore the arguments for health education in schools, including a discussion of the traditional view of health contrasted with the current view described in *Health and Physical Education in the New Zealand Curriculum* (Ministry of Education, 1999). Through exploring these contrasting views, an awareness can be gained of shifts in content and pedagogy from previous approaches to effective practice advocated in the current *Health and Physical Education in the New Zealand Curriculum* (Ministry of Education, 1999). Change, loss and grief as a learning context within health education is then discussed in order to provide a setting for the research study as well as a context for considering effective teaching and learning approaches in the classroom.

2.1.1 Concept of Health

Health and Physical Well-being is one of seven essential learning areas within the *New Zealand Curriculum Framework* (Ministry of Education, 1993). Tasker (1996/97:1) states that “historically health education has been shaped by many influences including political and community values, theories of teaching and learning, the purpose of schooling, and socio-economic and political issues.” Decades of reports and advocacy for social education to be part of the core curriculum (Department of Education, 1945; Department of Education, 1973; Department of Education, 1977) has helped to frame *Health and Physical Education in the New Zealand Curriculum* (Ministry of Education, 1999).

The need for health education in schools has also been highlighted by a report on *Barriers to Learning* (Education Review Office, 1997:23) that stated “if the content, skills and attitudes taught in health education are reflected in the school’s systems of student management and discipline, the overall culture or climate of the school is likely to be providing good conditions for learning.” More recently reports of, and media attention to, disturbing social trends and health issues including high levels of violent crime, teen pregnancy, drug and alcohol abuse and an increasing number of suicides (Ministry of Health, 1998) have emphasised the contribution that the new *Health and Physical Education Curriculum* can make to addressing some of these concerns.

Munro and Price (2001:15) suggest that “there are many ideologies that provide a foundation for our understanding of health education and that influence the practice of this in overt or covert ways in schools.” Traditionally, health was viewed as an ‘absence of disease’ with the dominant approach to health education in the 1970s and early 1980s concerned with a medicalised, disease prevention view (Tasker, 1996/97). This medical view drew on a scientific or behaviourist view of knowledge with the teacher as the ‘expert’ and the learner as a passive recipient. In this transmission model the dominant method of classroom practice was a teacher directed approach with the role of the teacher to transmit knowledge and information to learners. This is discussed further in 2.2, the section on Teaching and Learning.

The development of the *New Zealand Health Syllabus* (Ministry of Education, 1985) reflected a more encompassing, needs based approach to curriculum including the notion of health as a state of well-being. Although the concepts within this syllabus reflected quite a dramatic shift from previous approaches, the emphasis was still largely on the individual and mostly ignored the broader societal factors that affect health status (Tasker, 1996/97).

The current *Health and Physical Education in the New Zealand Curriculum* (Ministry of Education, 1999) challenges the traditional medical view of health from an ‘absence of disease’ to a more holistic concept of ‘wellness’ (Tasker, 1996/97). This curriculum aims to address the underlying causes of health issues. It is concerned with enabling students to participate in learning experiences that empower them to develop the knowledge, skills and attitudes needed to operate in an ever-changing world, rather than the acquisition of a fixed body of knowledge (Tasker, 1996/97). An empowerment approach such as this, requires a

constructivist view of teaching and learning with the role of the teacher as a facilitator of the learning process. This is discussed further in 2.2, the section on Teaching and Learning.

2.1.2 Change, Loss and Grief as a Learning Context Within Health Education

Change, loss and grief is *one* aspect of mental health within the *Health and Physical Education in the New Zealand Curriculum* (Ministry of Education, 1999). In this learning context several key concepts are explored to enable students develop the "knowledge, understandings and skills to support themselves and other people during times of stress, disappointment and loss" (Ministry of Education, 1999:37). These key concepts indicate the need for students to learn that change is a part of life and that change has the potential for both loss and gain; that loss comes in many forms and that we respond to loss by grieving; and that grief is a normal part of life experienced and expressed differently by individuals and groups (Ministry of Education, 2000).

Tasker (1996/97) suggests that schools have neglected to teach change, loss and grief in the past which may be due to the absence of this topic as a coherent learning context in the previous *New Zealand Health Education Syllabus* (Ministry of Education, 1985). In addition, a lack of understanding of grief in the wider community (Agee 1999 as cited in Dickinson & Tonkin, 2000), people's fear and anxiety about grief and societal expectations of how a grieving person *should* behave (Tonkin, 1995) may have influenced the previous lack of implementation of this topic in schools.

Previous theories have differed in their approach to the process and resolution of grief. The attachment theory described by Bowlby (1969 as cited in Klass, Silverman and Nickman, 1996) proposed that disengaging from the deceased, or severing bonds was essential for resolving grief. Worden (1982 as cited in Klass, Silverman and Nickman, 1996) supported this view in maintaining that one of the major barriers to the completion of grief is holding onto the past attachment, rather than forming new ones. This view of disengagement as a way of coping with and resolving grief, reflects a modernist approach (Klass, Silverman and Nickman, 1996). The modernist or rational approach adopts a normalizing discourse in that people are expected to recover from their emotional state, put the past behind them and return to 'normal' functioning as soon as possible.

However, an alternative view of managing loss and grief has been proposed by Klass, Silverman and Nickman (1996) who argue that bereavement cannot be viewed as a psychological state that merely ends and from which one recovers. They suggest that rather than letting go, the emphasis should be on negotiating and renegotiating the meaning of loss over time. In this approach, the emphasis is on altering and changing connections with the loss and accommodating a new perspective. This enables the individual to remain connected to the loss but also able to work through a *process* of grief.

In the wider community, grief is commonly feared and misunderstood (Agee 1999 as cited in Dickinson & Tonkin, 2000). Tonkin (1995) suggests that most people believe that grief is short term, progresses through a clear linear path or a series of stages and has an end point. In our community 'coping' is seen as displaying a lack of emotion and resuming *normal* life as soon as possible. Associated with this is the presumption that grief only follows death, is an individual and private experience and is not considered a response to other forms of loss such as illness or divorce.

Children are especially vulnerable to the effects of grief because loss in their lives is often misunderstood and in some cases not even acknowledged. Children and adults experience loss and grief in the same way, however children often lack an understanding of what is happening and the language to express it (Tonkin, 1995). Teaching and learning that enables children to understand the wide variety of changes and losses that occur throughout their lives in a positive and safe way (Ministry of Education, 2000; Parker, 1995) is one of the aims of change, loss and grief within the *Health and Physical Education in the New Zealand Curriculum* (Ministry of Education, 1999). As a learning context it can be seen as a preventative tool to enable children learn about healthy ways to grieve and to model these to others. Furthermore, by learning about change, loss and our response to it, children can be helped to develop life skills and caring relationships for others in a supportive, safe classroom environment that can also help to build resilience (Henderson & Milstein, 1996; Peters & Thurlow, 2002).

The notion of resilience is well documented in mental health education literature (for example, see Henderson & Milstein, 1996; Dickinson, 2001; Henderson, Bernard & Sharp-Light, 1999) and can be defined as:

the capacity to spring back, rebound, successfully adapt in the face of adversity, and develop social, academic and vocational competence despite exposure to severe stress or simply to the stress that is inherent in today's world (Rirkin & Hoopman 1991 as cited in Henderson & Milstein, 1996:7).

Schools can be effective resilience builders through providing programmes and environments that develop individual protective factors and mitigate the negative impact of stressful situations (Henderson & Milstein, 1996; Peters and Thurlow, 2002). This approach challenges educators to focus on children's strengths rather than their deficits and is a shift away from a medical model focused on fixing problems, to a wellness model focused on empowerment and self-efficacy (Henderson & Milstein, 1996).

Teaching and learning programmes in change, loss and grief as articulated in the *Health and Physical Education in the New Zealand Curriculum* (Ministry of Education, 1999) aim to develop lifeskills, foster resilience and protect the mental and emotional well-being of young people. These aims emphasise the importance of this learning context within health education and highlights the need for effective school and classroom implementation if these aims are to be fully realised.

2.2 Teaching and Learning in Health Education

This section will describe an emerging pedagogy in health education that positions the teacher as a facilitator of learning as opposed to the traditional view of the teacher as an expert. Teaching and learning processes and classroom environments that reflect the teacher as a facilitator are described within the learning context of change, loss and grief.

2.2.1 Teaching and Learning Approaches in Health Education

A curriculum such as the *Health and Physical Education in the New Zealand Curriculum* (Ministry of Education, 1999) should recognise the interrelationships between individuals and their environments (Tasker, 1996/97) and aim to enable students to develop not only the knowledge but also the skills and attitudes to improve their own health status and the health of their communities. Such a curriculum would be focused on student understanding (Halpen & Nummedal 1995 as cited in Ubbes, Black and Ausherman, 1999) rather than purely knowledge, be responsive to student's needs and use an empowerment approach whereby students are involved in taking social action to bring about change at a personal, community

or societal level (for example see Friere 1973 as cited in Tasker, 1996/97). This approach is in contrast to the traditional teacher as 'expert' view whereby the dominant method of classroom practice was teacher directed with the goal of transmitting information and knowledge to learners.

Enabling students to take an active part in their own learning involves the use of a variety of student centred, interactive processes with the role of the teacher as a *facilitator* of learning. The teacher as a facilitator approach is underpinned by a constructivist view of teaching and learning. Constructivist theory argues that in order to learn, students must construct and reconstruct their ideas (Brooks & Brooks 1993 as cited in Ubbes et al. 1999). Ubbes et al. (1999) suggests that personal constructions evolve when learners actively gather and process information rather than passively receive knowledge from teachers and resources as in the transmission approach. When learners and teachers construct their own knowledge they can be empowered to act with responsibility and have input into their own learning (Ubbes et al. 1999).

Constructivism encompasses two major positions; individual and social constructivism (Tasker, 2001). Social constructivism largely originates from Vygotsky, who views teaching and learning as essentially a social activity whereby students are encouraged to verbally elaborate developing concepts with others (Moore, 2000). In this approach, learning is viewed as the social construction of knowledge that occurs through negotiation and mediation with others (Jaworski, 1994). This perspective emphasises the importance of social interaction between students, and students and the teacher, in the classroom. King (1995 as cited in Ubbes et al. 1999) supports this view and suggests that during interactions with others, children may discover that their assumptions, values and understandings are different from their peers and that through explaining their views to others children re-construct their meanings.

One such approach that supports an empowerment, student centred, social constructivist approach includes the shared learning in action model (King & Occleston, 1998). In this model, students are encouraged to develop a more critical awareness of their own actions and how these actions can bring about change at a personal and societal level. Critical thinking (for example see Mogensen, 1997) is defined in the *Health and Physical Education in the New Zealand Curriculum* (Ministry of Education, 1999:56) as "examining, questioning,

evaluating, and challenging taken-for-granted assumptions about issues and practices” and is a key strategy underpinning critical action described in the shared learning in action model (King & Occleston, 1998).

I believe social constructivism and the use of interactive, student centred activities that enable the co-construction of meaning for both teachers and students is central to teaching and learning in health education. Through such approaches students are encouraged to think critically and become empowered to take critical action thus bringing about social change at a personal and societal level. These teaching and learning approaches in health education require the teacher to adopt the role of a facilitator in order for effective practice to be achieved.

2.2.2 The Role of the Teacher in a Constructivist Approach to Change, Loss and Grief

In adopting a constructivist approach to teaching change, loss and grief the role of the teacher is as a *facilitator* utilising student centred, interactive learning activities in their classroom programmes. Such activities are designed to empower students and provide them with opportunities to develop knowledge as well as skills, including those of critical thinking and social action. In the *teacher-as-facilitator* approach, flexibility is provided in the learning activities and contexts to ensure relevancy for the learners. The classroom environment is one of cooperative learning whereby control is shared *with* the students. In this environment students and their ideas are valued and the *teacher-as-facilitator* is encouraged to feel included not separate from the learning process. This open, supportive environment encourages safe participation for the teacher and students ensuring the best possible conditions for learning (Tasker, 2001).

Conceptualising the role of the teacher as a *facilitator* or an *expert* is a useful way of understanding particular teaching and learning approaches that are implicitly adopted and practiced in the classroom. Colquhoun (1992) uses the term ‘discourse’ to describe that which guides our practice at a subconscious level and emphasizes the power of dominant discourses. Munro (1991) prefers to use the term ‘folklore of schooling’ and suggests that the dominant approach to teaching and learning in education becomes a barrier to effective practice as it protects and maintains the status quo.

Traditionally the *teacher-as-expert* model has dominated classroom practice. In such classrooms, teacher directed approaches dominate with the teacher and their work construed in technical terms (Smyth, 2000) and as the “methodical insertion of ordered facts into the student’s mind” (Scheffler 1968 as cited in Smyth, 2000:492). This provides a major challenge to teacher change towards a *teacher-as-facilitator* approach. The dominant approach to teaching and learning as exemplified by the teachers in this study seems to be the *teacher as expert* discourse, described in more detail in Chapters 3 and 4.

2.3 Curriculum Implementation

This section explores a very small part of the enormous breadth of literature on curriculum implementation. It focuses on highlighting the importance of the teacher as a change agent and the importance of teachers’ thinking as a strategy to influence practice. Previous approaches to research perspectives as they relate to this study are also described. The different types of curriculum within the study are explained and some of the factors affecting curriculum implementation are highlighted. Professional development as a key strategy for developing teachers’ capability to effectively implement curriculum completes the chapter.

2.3.1 Curriculum Implementation

Curriculum implementation is concerned with the means of achieving desired educational outcomes (Fullan, 1991) and is primarily concerned with the unity between theory and practice (Smith and Lovat, 1991). In the context of teaching and learning, attention must be focused on *teachers* as key curriculum decision makers and essential elements of successful curriculum implementation (Kelly, 1999; McGee, 1997). Teachers themselves possess the pedagogical freedom to interpret the objectives of the curriculum and to decide whether to implement an innovation or not (Brown and McIntyre, 1993; Kosunen, 1994). Evans (1993 as cited in Hill, Hawk & Taylor, 2001) suggests that there is a need to build commitment to innovation by teachers in order to ensure implementation. Hattie (2003) argues that in terms of learning teachers make the difference and we must value the teacher and teaching as major change agents.

Fullan (1991:117) suggests that “educational change depends on what teachers’ do and think.” Teacher thinking concerns itself with the mental lives of teachers, the planning, decision-making, beliefs and theories that influence teacher action. Clark and Yinger (1977)

suggest that teacher thinking and behaviour is guided by a set of organized beliefs, often operating unconsciously. The organized unconscious beliefs that teachers have about learning are obviously key in determining how they operate in the classroom and are essential in changing teacher practice.

Ten years ago, research on curriculum implementation was considered a recent phenomenon (Snyder, Bolin and Zumwalt, 1992). In fact, *implementation* is not a term found in early curriculum literature rather the production and installation of programme content was used to describe the process of curriculum implementation (Snyder et al. 1992). Over time, it became apparent that the installation of curriculum could not be taken for granted and that the role of the teacher in implementation was important (Snyder et al. 1992). The two main perspectives in the research literature, the fidelity perspective (Fullan and Pomfret 1977 as cited in Snyder et al. 1992) and the mutual adaptation approach (McLaughlin 1976 as cited in Snyder et al. 1992) explore approaches to curriculum implementation and contain “certain assumptions about curriculum knowledge, change and the role of the teacher” (Snyder et al. 1992:404).

The fidelity perspective (Fullan and Pomfret 1977 as cited in Snyder et al. 1992) determines the *extent* of implementation and the degree to which an innovation’s actual use corresponds faithfully with its intended or planned use. In this perspective, curriculum knowledge is created by experts outside of the classroom and implementation is deemed successful when teachers carry out the curricular change as directed (Snyder et al. 1992). A report by the Education Review Office (1996) into the implementation of the New Zealand Science Curriculum in New Zealand schools is an example of such an approach. This report evaluates the extent to which this curriculum was implemented as intended by the developer.

In contrast, the mutual adaptation approach (McLaughlin 1976 as cited in Snyder et al. 1992) is interested in how an innovation is *adapted* during the implementation process. In this approach, the assumption is that the nature of implementation should not be prescribed but should evolve (Fullan, 1991) and teachers and curriculum developers will make necessary adjustments to a curriculum as it is implemented.

This study adopts a combination of both research perspectives in that it explores how teachers implement the official curriculum as intended by the curriculum developers, while it also

highlights how the curriculum is adapted during the implementation process. This approach is appropriate given that *Health and Physical Education in the New Zealand Curriculum* (Ministry of Education, 1999) is still a relatively recent curriculum initiative with schools at various stages of implementation (Ministry of Education, 2001). Also, the absence of any previous qualitative classroom studies in change, loss and grief enables a broad research perspective to be used.

Classroom based research that explores curriculum implementation from the perspective of teachers as key curriculum decision makers is important for highlighting the links between teachers' beliefs, practices and the broader issues which impact on the implementation of curriculum initiatives in schools. Marland and Osborne (1990) suggest that studies such as this hold a key to improving teaching effectiveness, the facilitation of teacher professional development and the implementation of curriculum in schools.

2.3.2 Types of Curriculum

'Curriculum' is a broad term described by Goodson (1994 as cited in Marsh, 1997:3) as "a multifaceted concept, constructed, negotiated and renegotiated at a variety of levels and in a variety of arenas." McGee (1997) suggests that curriculum statements are just one part of the total curriculum which can include one or more of the following aspects:

- **Official curriculum:** the curriculum statement entitled *Health and Physical Education in the New Zealand Curriculum* (Ministry of Education, 1999)
- **Planned curriculum:** the teacher's plans and programmes that outline what is intended to happen in the classroom
- **Enacted curriculum:** that which happens in 'practice' in the classroom, usually determined by the teacher
- **Received curriculum:** the reality of students' experience
- **Hidden curriculum:** the 'hidden' learning that occurs as a by-product of the curriculum, social relationships and organisation of the school

The official, planned and enacted curriculum will be used as a basis for this study of curriculum implementation. The experienced and hidden curriculum will not be used as part of the research process as it was teachers' not students' experiences that were the focus for

this research. The hidden learning as a result of implementing change, loss and grief was not studied.

2.3.3 Factors Affecting Curriculum Implementation

Teachers are engaged in the planned and enacted curriculum and make curriculum decisions that are influenced by a variety of factors (for example see Fullan 1982 as cited in Marsh, 1997). McGee (1997) describes these factors as both external and internal to the teacher. Such factors are important as they ultimately affect how a curriculum is implemented in schools.

External factors may include the requirements of the national curriculum and the culture of a school in which teachers operate. Hawthorn (1992 as cited in McGee, 1997) found that a tension existed between teacher autonomy and the obligations of official curriculum requirements. In a study conducted by Atjonen (1993 as cited in Kosunen, 1994) the majority of teachers did not use the official curriculum in the way the curriculum planners had anticipated. This suggests a mis-match between policy-makers' intentions and classroom practice. External factors such as structures and policies and the support, or lack of, that teachers receive, can have a major effect upon their willingness to implement new curricula (McLaughlin 1987 as cited in Marsh, 1997). Fullan (1999 as cited in Hill, Hawk & Taylor, 2001:3) suggests that "an innovation won't go anywhere unless the school culture is favourable in terms of the way people solve problems and work together."

Internal factors may include such things as teachers' own philosophy and beliefs, subject knowledge, teaching skills and resistance to change. Teacher's beliefs and attitudes are not only *reflected* in teacher decisions and actions but also *drive* important decisions and practice (Stuart and Thurlow, 2000). Swann and Brown (1997) found that teachers were vague and in some cases confused when implementing the National Curriculum in Scotland. They suggested that there appeared to be a gap between the conceptual and theoretical substance of the innovation and teachers' previous or existing mental processes that continued to take precedence. It seems that teachers' philosophy and beliefs are essential to understanding teacher practice and are a factor influencing curriculum implementation.

Burns and Lash (1988) found that one of the major constraints teachers deal with in implementing curriculum is their subject matter knowledge. Connelly and Clandinin (1988)

contend that knowledge resides in teachers' past experiences, present ideas and future plans while Elbaz (1983) found that teachers' knowledge is actively related to their world of practice. In a study conducted by Kennedy (1997) a lack of teacher knowledge resulted in difficulties interpreting the breadth and scope of a newly conceptualised learning area. Smith and Sendelbach (1979 as cited in Wittrock, 1986) found that a teacher's limited subject matter knowledge resulted in distortions and significant omissions in the content of science instruction. Other researchers (for example see Eaton, Anderson & Smith 1984 as cited in Wittrock, 1986) have shown that teachers with limited curricular knowledge in certain subjects may teach incorrect content or fail to recognize their student's faulty understanding.

Teachers' pedagogical skills or lack of, have been identified as having an affect on curriculum implementation. Ariav (1988 as cited in Marsh and Willis, 1995) revealed that teachers' lack of skill in how best to teach curriculum, affected the extent and degree of implementation.

Resistance to change as an internal factor can also be a major barrier to the implementation of any initiative in schools. Evans (1993 as cited in Hill, Hawk & Taylor, 2001) argues that the task of managing change is not technical but motivational. The personal characteristics of teachers (Fullan, 1982) or prior experiences (Brown, 1999) may influence their willingness or readiness to engage in change.

A variety of factors both internal and external to the teacher affect the degree and extent of curriculum implementation. These factors will ultimately influence the success or otherwise of implementing innovations and must be considered in the planning and development of professional development programmes for teachers.

2.3.4 Professional Development

Professional development plays a key role in ensuring that quality teaching and learning communities operate and are sustained. However, professional development must do more than just develop professional knowledge, it must also change professional practice. Some of the key strategies for effective professional development are highlighted in this section and methods to achieve these strategies are suggested.

Mathews & Grant (2000:1) suggest that "professional development has enormous potential for expanding teacher knowledge and skills, contributing to growth and development both for

individuals, schools, organizations and ultimately enhancing student learning.” Furthermore, professional development has the potential to enable teachers to challenge and reflect on the taken-for-granted in their teaching that is implicit in their actions (Hopkins 1994 as cited in Burt and Davison, 1998; Smyth, 2000). To achieve this, professional development must explore the values and beliefs that underpin teacher practice, develop not only content but also pedagogical knowledge and include personal as well as professional development for teachers.

Professional development should focus on examining the values, beliefs and understandings teachers’ have that underpin their practice (Hill, Hawk & Taylor, 2001). This constructivist approach requires individuals to consider and reflect on their practice in light of these beliefs and conceptual understandings, and then consider alternative more effective strategies. Schon (1983 as cited in Zeichner and Liston, 1996) uses the term *knowledge-in-action* to describe knowledge embedded in teachers’ practices and suggests that reflective teaching is necessary to make more conscious tacit knowledge that is often not expressed. Schon (1983 as cited in Zeichner and Liston, 1996) also suggests that it is only through being explicit about our implicit understandings can we “criticize, examine and improve them.” The Education Review Office (2000) in their review of in-service training for teachers in New Zealand schools supports this view and argues that professional development is unlikely to impact on the work of teachers unless their beliefs about teaching and learning are re-examined and strategies consistent with these beliefs are adopted.

The focus of professional development in the past has been on implementing curricula through a fidelity perspective (Fullan and Pomfret 1977 as cited in Snyder et al. 1992) and on developing teachers’ curriculum knowledge. Whilst curriculum and subject knowledge are important, developing teaching and learning approaches are critical for developing effective teacher practice (Hill, Hawk & Taylor, 2001; Hattie, 2003). Stigler (2002 as cited in Willis, 2002) argues that we should attach the most importance to improving teachers’ teaching methods, whilst Hill, Hawk & Taylor (2001) argue that as well as the processes used by teachers to engage students in learning, other issues including relationships between teachers and students and the quality of teacher talk (for example see Annan, Kuin Lai and Robinson, 2003) must also be considered.

Professional development it seems should also be located in the real world and experiences of teachers and cannot be divorced from teachers' personal and professional identities. Focusing only on the knowledge and skills of teaching fails to acknowledge the teachers' whole self, since it is the teacher that brings significance to the teaching and learning act (Day, 1999). Personal development that involves teachers sharing their personal stories and life experiences in a supportive, safe environment can potentially add to and inform their work in the present (Zeichner & Liston, 1996). Personal development may also enable teachers to explore issues that have impacted on their willingness to engage in change.

The Education Review Office (2000) suggests that teacher development should be *balanced* between out of school learning (such as in a workshop setting), classroom practice and collegial discussion in schools. Traditional approaches focused on one off workshops that remove the teacher from their classroom context, have failed to provide the kind of support that enables teachers to return to school and implement what they have learned (Burt and Davison, 1998). Hill, Hawk & Taylor (2001:6) suggest that "a course might improve knowledge but does not necessarily change professional practice".

Joyce and Showers (1996 as cited in Hill, Hawk & Taylor, 2001) advocate that coaching is an effective form of professional development. They suggest that the best way to change classroom practice is to work in class with a teacher either observing or being observed. The coaching model involves an approach whereby trust and rapport is developed between colleagues so that ongoing feedback and sharing of best practice occurs. In this model colleagues have the opportunity to learn from each other. Burt and Davison (1998) caution that for this approach to be effective teachers need training in the role of how to be a coach.

Another professional development tool that provides structures and support for teachers to improve their teaching by giving and receiving feedback, is the critical friend approach. Sachs (1997 as cited in Burt and Davison, 1998) has argued that successful teacher development involves some elements of challenge that help teachers reflect on the effects of their own practice. If this is to occur, teachers need the support and commitment of a 'critical friend' within an established trusting relationship (Day, 1999). Bambino (2002:26) suggests that in the United States "critical friends groups have been the catalyst for changes in the teaching, learning, culture, and climate of learning communities in a variety of schools." In New Zealand techniques such as critical reflection have successfully achieved the

development and connection between teacher's conceptual understanding and their classroom practice (Education Review Office, 2000).

From the literature it seems that effective professional development must enable teachers to examine the beliefs and values underpinning their practice, provide opportunities to develop content and pedagogical content knowledge and also involve personal development. Strategies to achieve this are best balanced between a variety of approaches. Professional development workshops outside of the school setting can assist teacher content and curriculum knowledge (Hill, Hawk & Taylor, 2001) whilst in-class support and reflection through peer coaching (Joyce and Showers 1996 as cited in Hill, Hawk & Taylor, 2001) and/or a critical friend (Bambino, 2002) can provide opportunities to develop pedagogical content knowledge. All approaches must include opportunities for teachers to critique, examine and challenge existing beliefs and practices, and reflect on the taken-for-granted in their teaching.

The following chapter describes the methodology, methods and processes used for the research and then Chapter 4 provides an analysis of the data collected.

CHAPTER 3

METHODOLOGY

This chapter will describe the methodology, methods and processes used for the research including the sources and selection of data, ethical issues, data collection and analysis.

The study's focus suggests that ethnographic strategies of enquiry within a case study design are appropriate. Qualitative research techniques were used to explore teacher's perspectives of change, loss and grief, identify how these perspectives are enacted in the classroom and identify key issues in curriculum implementation. Some of the characteristics of qualitative research described by Bogdan and Biklen (1998) include the assertion that actual settings provide the direct source of data, descriptive data is important, process and meaning is of essential concern and data is analysed inductively.

The use of qualitative research techniques were appropriate for this study given that the research was conducted in the classroom and school setting and concerned the gathering of descriptive data. The research questions emphasize the gaining of meaning from teachers' perspectives which required the data to be gathered and analysed interpretively in order to generate new understandings. These features of the study are all consistent with qualitative research methodology.

According to Crotty (1998:7) ethnographic enquiry "seeks to uncover meanings and perceptions on the part of the people participating in the research, viewing these understandings against the backdrop of the people's overall worldview or culture". Uncovering and determining meanings from the research participants involved my own interpretation and inductive analysis of the data gathered. This presented a challenge for me as a beginning researcher. Throughout the research I felt concerned at my probable lack of objectivity and struggled to feel confident in my tentative analysis of the data that emerged. McIntyre and MacLeod (1978 as cited in Jaworski, 1994:62) make the point that "any research undertaking reflects implicit values in the sense that the researcher focuses attention on some things to the neglect of others." Being aware that viewing the research through my

own subjective lens and bias was unavoidable helped to ensure that my emerging interpretations were tentative and open to scrutiny.

3.1 Case Study

A case study design was used given that the research is based on the individual perspectives of **two** teachers. The emphasis on two teachers as 'the case' differs slightly from Merriam (1988 as cited in Bogdan and Biklen, 1992) who describe a case study as a detailed examination of one setting, or a single subject. In this research the enquiry concerned more than one case. Stake (1995) describes the study of a number of cases jointly as a collective case study whilst Bogdan and Biklen (1992) prefer to use the term multicase studies. Regardless of the term used, each case involved a concentrated investigation of each teacher (Stake 1988 as cited in Denzin and Lincoln, 1998).

The purpose of studying two separate cases was to provide an insight into the issue of curriculum implementation from the unique perspective of two different sources. Glasser and Strauss (1967 as cited in Taylor and Bogdan, 1998) suggest that this approach broadens the applicability of theoretical insights. As a collective case study (Stake, 1995) this approach has enabled rich and meaningful data to be collected from teachers with different experiences, backgrounds and beliefs. Also, the use of two teachers enabled the research process from the first teacher to inform and guide the approach taken with the second.

3.2 The Research Setting

The study was conducted over a four-month period from August until November 2002. The classroom and school of each teacher constituted the research setting. The case study teachers were chosen for both their similarities and differences to each other. Both were experienced classroom teachers who had held positions of responsibility within education at some time. Jan taught a junior (year 2) class at a small, rural school and had previously attended professional development in health education including several courses in change, loss and grief. In contrast, Hazel taught a middle school (year 5 – 6) class at a large, urban primary school. Hazel had not attended any specific professional development in health education, nor had she attended any courses in change, loss and grief. It was hoped that these differences would provide rich and interesting data and enable contrast between the experiences of each case.

3.3 Ethical Issues

Ethical issues were considered and addressed carefully prior to the commencement of the study. The research was approved by the Christchurch College of Education's Ethics Committee and was carried out in accordance with its standards. Participation in the research project was strictly voluntary, with written consent obtained from each teacher and principal beforehand. It was not considered necessary to obtain parental permission for each child in the class to participate, as the study did not involve the children directly. No information was gathered or stored without informed consent (see Appendix 3).

All information collected was treated as strictly confidential with pseudonyms used to protect the anonymity of the teachers and their schools at all times. This anonymity will also be protected in the publication of findings. Both Jan and Hazel were aware that they were able to withdraw from the study at any time without reason.

At the completion of the research, both teachers concerned will receive a complimentary copy of the thesis which they may choose to share with their colleagues. Reporting back to Jan and Hazel will need to be handled sensitively as they will be able to recognise themselves within the research and may find the analysis, discussion of the data and issues raised challenging. As a teaching colleague, I have tremendous respect for the contribution they have made to the study and for the opportunity to share the learning that I have gained. It is certainly not my intention to be critical of the teachers themselves, which is why I will arrange to meet with each of them to discuss the findings prior to providing them with a copy of the report.

3.4 Sources of Data

The importance of social meaning suggests research methods that enable us to understand the world from the perspective of individuals (Michel, 1994; Cornett, 1990). Brown and McIntyre (1993) argue that teacher's accounts should be grounded in their own ways of making sense of the things they do. In this study, data was obtained from a variety of sources including teacher's perspectives, planning and practice. Fieldwork techniques that included participant observation, interviewing and document analysis were used to discover meaning from the unique and individual perspective of each teacher. The collection of a variety of data from many different sources (see Table 1) ensures a multi-method approach to data collection and also enables a fuller understanding of the phenomena that is being studied (Bogdan and Biklen, 1992).

Table 1. Sources of Data and Fieldwork Techniques Used In The Study Design

Sources of Data	Fieldwork Techniques	Type of Curriculum
Unit plan	Document analysis	<i>Planned Curriculum</i> Written intention
Teacher's perspectives	Interview 1	<i>Planned Curriculum</i> Verbal intention
Teacher's practice	Participant observation	<i>Enacted Curriculum</i> Intention in action: practice
Teacher's perspectives	Interview 2	Reflection on <i>Enacted Curriculum</i>

3.5 Data Collection

Data were collected over a period of four months and primarily involved participant observation and interviewing. Data were also collected from both teachers' planning documents as this provided an example of the planned curriculum that informed their practice. A summary of the data collected and the process used is shown in Table 2.

Table 2. Types of Data Collected and The Research Process Used

Jan	Hazel
Interview 1	Interview 1
Collection of teacher's planning documents	Observation 1
Observation 1	Observation 2
Observation 2	Observation 3
Observation 3	Interview 2
Observation 4	Collection of teacher's planning documents
Mini interview	
Interview 2	
Collection of child's portfolio sample	

3.5.1 Interviews

Interviews provide rich insights into people's experiences, perspectives, beliefs and feelings (May, 1997). Eisenhart (ibid as cited in Jaworski, 1994:64) describes interviewing as "the ethnographer's principle means of learning about participants' subjective views; thus, ethnographic interviews are usually open-ended, cover a wide range of topics, and take some time to complete."

The teachers in this study were involved in two semi-structured interviews, one prior to and one at the completion of the classroom observations (see Table 2). In addition, a mini-interview was held with Jan at the completion of the third classroom observation and prior to the second interview. This mini-interview was 20 minutes long and was conducted as a result

of new ideas and hunches that emerged during the classroom observations. With the exception of the mini-interview, the interviews were approximately one hour in length and were conducted within the school setting for convenience and accessibility. Semi-structured interviews were chosen as they provided an interview structure with questions prepared in advance, but did not limit the interview to the questions specified (see Appendix 1). Other questions or points of clarification emerged during the interviews which added to the pre-established questions (Glesne, 1999; May 1997). Swann and Brown (1997) used an open-ended interview in their study of teacher's thinking. The researchers regarded the open-ended interview as the best strategy available for getting close to teachers' classroom thinking.

Hazel's second interview differed from that of Jan's as new questions emerged during the observations in her classroom that needed to be asked. The experience of having already collected data from Jan also helped re-shape the questions used when working with Hazel. This proved to be one of the advantages of working with more than one teacher or case. Most interviews were taped and transcribed. A tape recorder was also used in many of the classroom observations to specifically record conversations during the teaching and learning sequence. This strategy ensured that teacher's talk was recorded faithfully and helped to ensure the accuracy of the field notes written as soon as possible after each observation. Unfortunately some of the taped interviews with Hazel were lost due to researcher error.

3.5.2 Classroom Observations

May (1997:155) describes participant observation in a research setting as "engaging in a social scene, experiencing it and seeking to understand and explain it". For this study I was engaged as an *observer as participant* (Glesne and Peshkin, 1992) for three observations with Hazel and four observations with Jan during the teaching of a unit on change, loss and grief. Observations typically took 45 – 60 minutes and were conducted over the course of a three-week unit following the first interview. Data was gathered from Jan first, followed by Hazel. Unfortunately due to personal commitments and the timing of the taught unit, I was only able to manage three classroom observations with Hazel.

My role in the setting was primarily as an observer of the teacher who was the participant in the study. Although the children were an essential part of the teaching and learning process, they were not observed directly. In this role I was positioned towards the back or side of the classroom and was primarily an observer of the teacher in the classroom setting. In Hazel's

classroom this role was easy to assume as I was not introduced to the class and the children appeared to ignore me. In Jan's classroom however, I had a different relationship with the class who I had previously taught for one lesson. In this case, it was more difficult to remain distant from the children who wanted me to participate in their discussions. I managed this by listening in to conversations rather than actively participating and by maintaining some distance in my physical positioning within the classroom.

3.5.3 Document Analysis

Data were collected from documents used by Jan and Hazel in their planning and teaching. These documents consisted of teaching resources and unit plans. Jan also provided an example of one student's work, presented as part of the assessment carried out for the unit. This served more to remind me of the activities that the children were engaged in than for any other purpose.

Documents like teacher's plans provide crucial data for this research because they contain evidence of the planned curriculum as interpreted and intended by the teacher. May (1997) argues that documents become a medium through which the correspondence between the document and the events to which it refers, can be described. The analysis of these documents occurred at the conclusion of the field research and alongside data analysis from participant observation and interviews.

In addition to data collected from interviews, observations and documents, I wrote my own reflective notes at various stages throughout the study. These consisted of jottings following incidents I had experienced and also included my own ideas and emerging interpretations that I believed during the course of the research had significance. Many of these ideas were later discarded but provided a useful purpose at the time as they enabled an immediate analysis of events and also an additional source of data for more formal analysis later in the research. This reflective part of the research process also enabled me to recognize my own role within the research and also become aware of the subjectivity and bias in my emerging interpretations of the data gathered. This strategy alongside a multi-method approach to data collection, has provided some validity and rigour to the research conducted.

3.6 Data Analysis

Analysis of data throughout the research took various forms and occurred both formally and informally. Informal analysis took place alongside data collection at various times during the study. The techniques used to analyse data during collection included checking my early interpretations with Jan, reading and coding early data and writing a research journal. The research journal was used to record questions, hunches, expectations and interpretations as the research progressed. This informal analysis allowed reflection on the data as it was collected and the recording of early impressions. It also enabled the research questions to evolve and be modified in light of new insights.

One example of this process occurred during the analysis of my field notes when an evolving interpretation (Ezzy, 2002) developed that I wanted to explore further. As a result of this a mini interview of about ten minutes was scheduled with Jan to explore the existing ideas that I was developing. This was a valuable form of analysis as it eventually eliminated this particular line of enquiry from the study.

More formal data analysis occurred at the conclusion of the classroom observations and interviews involving close scrutiny of field notes, transcripts and informal recordings. During this stage data which had been transcribed after collection was read numerous times to determine possible themes and codes that emerged. The raw data tapes were also listened to alongside the transcribed records, to jog further memories that could be used to enhance the research journal. Ezzy (2002) describes the use of these strategies as an attempt to facilitate the interpretive process of qualitative research.

The analysis of each case then involved working with and analysing the data on three levels: literally, interpretively and reflexively (Mason, 1996). *Literally*, the data analysis occurred in two stages and used two different approaches. Initially, data from each case was analysed separately according to the research questions and the themes and patterns that emerged from within the data. This stage of thematic analysis (Ezzy, 2002) occurred immediately after the data collection had been completed.

After the first stage of data analysis it became apparent that an analysis framework was necessary to illustrate more closely the linkages between and within the themes that were emerging from the data. The framework that emerged used the concept of *discourse* that

teachers negotiate and operate within when engaged in the work of teaching. Colquhoun (1992:4) suggests that “a discourse guides our practice at a subconscious level and implicitly means that in our practice we tend to take things as given or natural”.

As part of the data analysis the discourse framework that emerged was used to explore two contrasting discourses that teachers may unconsciously operate and exist within. By using this framework, each case could then be analysed alongside the other to provide a richness in understanding that was not apparent when conducting a separate analysis of each case. Using a framework also seemed to more clearly connect the literature to the data and vice versa.

The data provided by Jan and Hazel seems to illustrate that teachers operate within different discourses at different times and for different reasons. In this way, existing discourses are not a static entity but more akin to a continuum where teachers may exist in various ways and at different points and stages. Colquhoun (1992) describes teachers drifting in and out of the various discourses and emphasizes the power that dominant discourses have over teachers. He suggests that teachers can do little to resist the dominant discourse without adequate support and resources.

The two discourses that have been used for this study include the *teacher-as-expert* and *teacher-as-facilitator* discourses. These discourses have been modified from two paradigms of health education developed by Tasker (1999 as adapted from Jensen, 1997) as the data seemed to reflect similar themes to those represented in this model (see Appendix 2). The dominant discourse has been identified as the *teacher-as-expert* discourse whilst the *teacher-as-facilitator* discourse is used as a contrast to the existing expert discourse.

Table 3 explores the discourse framework and highlights two of the three identified themes from the study; teachers’ perspectives of change, loss and grief and teaching and learning within a health education context. A description of each discourse using the model developed by Tasker (1999 as adapted from Jensen, 1997) and modified to reflect the findings from the data, is provided below each theme. Ideas developed by Good and Brophy (1994) in contrasting teaching and learning as the transmission of information versus social construction of knowledge have also been included. Their work provides a useful contrast of different models of teaching and learning and has been included, as it supports and adds to the ideas presented in the discourse framework.

A third theme of curriculum implementation not included within the discourse framework, is explored in Chapter 4 and attempts to highlight the issues, barriers and enablers that may define or shape the particular discourse that teachers unconsciously work within.

Table 3. The Discourse Framework Used in Data Analysis

Teacher-as-Expert Discourse	Teacher-as-Facilitator Discourse
Teachers' Perspectives of Change, Loss and Grief	Teachers' Perspectives of Change, Loss and Grief
<ul style="list-style-type: none"> • Medicalised/scientised – a focus on the physical/chemical • Treat individual behaviour, attitudes and emotions as relevant symptoms needing attention. 	<ul style="list-style-type: none"> • Holistic – physical, mental and emotional, social, spiritual
<ul style="list-style-type: none"> • Grief as an illness needing to be fixed, health as the absence of disease 	<ul style="list-style-type: none"> • Grief as part of human existence, health as well-being
Teaching and Learning Within a Health Education Context	Teaching and Learning Within a Health Education Context
<ul style="list-style-type: none"> • Classroom environment emphasises teacher in control, teacher feels safe 	<ul style="list-style-type: none"> • Classroom environment emphasises teacher sharing control, students feel safe
<ul style="list-style-type: none"> • Teacher directed/transmission approach • Knowledge transmitted from the 'expert' to the students • Teacher judges correctness of students' responses • Students passive in the learning process • Activities emphasise replication of correct responses 	<ul style="list-style-type: none"> • Student centred/constructivist approach • Knowledge constructed through discussion between teacher and students using students' existing ideas as a starting point • Teacher facilitates learning; poses questions, seeks clarification, promotes dialogue • Students active in the learning process • Activities focus on eliciting students' thinking and on applying learning to authentic issues and problems

From: Tasker (1999 adapted from Jensen, 1997); Good and Brophy (1994)

Following literal analysis of the data using the discourse framework, the data was then analysed *interpretively* and *reflexively* by considering my own interpretation of events and by considering my impact on the research. Holliday (2002) describes reflexivity as coming to terms with and making the most of, the complexities of the researcher's presence in the research setting. To account for my presence and inadvertent impact on both research cases, a reflective journal was used to record my thoughts and hunches and to locate myself and my

biases within the data. The reflective journal was also used to position myself as a researcher, not as an evaluator of classroom practice.

To ensure my own judgements were not colouring the data analysis, the data collected was discussed with my supervisors. Interview transcripts were shared with the study subjects for accuracy, whilst emerging themes in the data analysis were shared with colleagues and supervisors.

The various stages of data analysis and the use of a discourse framework have enabled an in-depth analysis of the data to be completed. Chapter 4 describes the study's findings using the two key themes from the discourse framework and the third theme of curriculum implementation. These themes are presented and discussed in detail in the next chapter.

CHAPTER 4

ANALYSIS OF FINDINGS

This chapter presents three themes that illustrate and help to explain two teachers' ideas and practices about change, loss and grief and its implementation in the classroom. Data have been collected from the planned and enacted curriculum of Jan and Hazel and organized according to these themes. The data have then been analysed using the *teacher-as-expert* and *teacher-as-facilitator* discourse to illustrate how Jan and Hazel operate within and negotiate these different discourses. The themes used to explore these discourses relate directly to research questions from the study. Theme one relates to teachers' perspectives of change, loss and grief while theme two explores teaching and learning within a health education context.

A third theme explores some of the key issues that Jan and Hazel felt would or could impact on the implementation of change, loss and grief as a learning context in the classroom. This theme is linked to the previous two themes in that teachers' ideas and practices are reflected in and influence curriculum implementation (see for example Ariav 1988 as cited in Marsh and Willis, 1995; McLaughlin 1987 as cited in Marsh, 1997). This theme however, attempts to highlight some of the key issues, barriers and enablers that may define or shape the particular discourse that teachers operate within. It is these issues that provide the context within which teachers work, highlight the complexity of teaching and illustrate the challenge in resisting the dominant *teacher-as-expert* discourse.

4.1 Teachers' Perspectives of Change, Loss and Grief

This theme describes Jan and Hazel's personal conceptualization and understanding of change, loss and grief and also describes the beliefs that they have about this as a learning context within the *Health and Physical Education in the New Zealand Curriculum* (Ministry of Education, 1999). Jan and Hazel's perspectives have been analysed using the *teacher-as-expert* and *teacher-as-facilitator* discourses.

4.1.1 Teacher-as-Expert Discourse

Within the *teacher-as-expert* discourse, a teacher's concept of change, loss and grief is concerned with a medicalised/scientised focus on the physical, whereby grief is seen as an illness or condition that needs to be fixed. This perspective is influenced by a broader view of health as an absence of disease (Tasker, 1996/97) and is reflected in teachers' personal beliefs about change, loss and grief and how it is viewed as a learning context within the official curriculum.

4.1.1.1 Beliefs about Change, Loss and Grief

Within the *teacher-as-expert* discourse, change, loss and grief seems to be viewed as an experience that individuals should cope with and move on from as quickly as possible. It appears from comments by both Jan and Hazel that 'feeling better', 'moving on' and removing yourself from your own grief by focusing on others, is to be encouraged. The ability to 'cope' seems to be admired and seems to suggest that a grieving person should be 'in control'.

You just have to accept that as part of life and go onto the next positive thing (Jan)

So, it was a lot of looking at and admiring people that could cope with this change (Hazel)

From the perspective of the *Health and Physical Education in the New Zealand Curriculum* (Ministry of Education, 1999) an important aspect of teaching about change, loss and grief is learning to support others and in doing so help to create healthy communities. However, of equivalent importance is learning how to help yourself which is fundamental to being able to support others. Jan acknowledges this in the following statement.

But I had that objective at the end that they would have that understanding of how to help themselves feel better about it and how they could help others (Jan)

Jan and Hazel also illustrated their belief in 'moving on' from grief during their classroom teaching. In Jan's classroom, the children were encouraged to reflect on a time when they had lost a pet and had to describe to their partner what they had done to feel better about it. The

emphasis seemed to be very much on being helped to *fix* the problem, a reflection of health as an absence of disease within an expert discourse. Hazel used the concept of a timeline in her teaching to emphasise that at the *end* of the process you feel relieved and ‘over it’ [the grief].

We’re trying to make the kids deal with these situations but also through looking after others, like instead of them wanting to feel how they feel, how would you help someone else. That takes the emotion out of their own situation and they have to look at it from a different angle (Hazel)

So you have to bring them back from getting deeper and deeper into their grieving and just completely changing what you’re doing and saying, you know bringing it back into reality (Hazel)

Jan and Hazel’s connection with this concept of change, loss and grief seems to reinforce their belief that dealing with grief in a detached way enables you to ‘get over it’ or cope and that this is the best way to manage this type of situation. Hazel seemed to operate more strongly in this discourse than Jan who had an understanding of accepting grief and learning how to support others. This belief seems to reflect the attachment theory proposed by Bowlby (1969 as cited in Klass, Silverman and Nickman, 1996) which suggests that disengaging from the deceased is essential for resolving grief.

4.1.1.2 Change, Loss and Grief Within the Curriculum

Within the expert discourse, change, loss and grief could be viewed as more an incidental topic that can be integrated with other activities rather than as a specific unit of work. In this way it appears that the topic is conceived in more of an implicit way, covered incidentally and integrated with other areas. The topic itself could be viewed as necessary only when issues arise and as a way to ‘fix problems’ rather than planned for and delivered explicitly. This belief is in contrast to the official curriculum and the *teacher-as-facilitator* discourse both of which have identified change, loss and grief as a specific learning context requiring explicit, holistic and planned learning experiences to be taught. The holistic approach is not to deny the importance of utilising the teachable moment and reinforcing concepts in a variety of different settings, rather it is based on a belief that planned experiences are essential to learning and contribute to the overall classroom experience. Hazel in particular, operates clearly within the expert discourse as the following comments reveal;

We've dealt with it but not as a whole big topic. A lot to do with change, a lot to do with interchange, so we teach them how to move, change, have different teachers. The children in this community don't lose a lot so when something happens... it's that incidental stuff (Hazel)

It's teaching those children how to deal with this situation, which we are doing but we're doing it through another avenue; might do it through cross country, we might do it through the swimming sports (Hazel)

Hazel's particular view of children's experience of loss as a concept is illustrated by these comments. She seems to justify her stance by explaining that this position is acceptable because the children in *this* community don't lose a lot or suffer from a 'disease of loss'. If this is her belief, then planned holistic experiences may seem to be unnecessary. This perspective demonstrates Hazel's operation within the expert discourse and enables her to feel safe and 'right' in justifying her position of integrating change, loss and grief with other aspects of curriculum and school life.

Perhaps teachers operate in this discourse due to the pressures of an 'overcrowded curriculum' which may encourage them to overly integrate curriculum areas. A lack of understanding of the concept of change loss and grief and how as a learning context it can be most effectively implemented in the classroom could also be the reason. As Hazel had not attended any professional development courses in this area, the latter interpretation seems to apply.

Operating in this discourse also involves avoiding change, loss and grief if it raises any issues that might be personal to the children or their families. Hazel possibly views these issues as important to avoid.

Grief children often have to share by themselves because it deals with their family and what happens at home... they bring that to school to talk about, but that's not a lesson (Hazel)

Hazel's concept of a 'lesson' in this comment is interesting too. She seems to infer that a lesson is determined by the teacher, not something negotiated *with* the children or as a result

of their already existing ideas. This is discussed further in the Teacher-as-Expert Discourse 4.2.1.2: Teaching Strategies and Approaches.

4.1.2 Teacher-as-Facilitator Discourse

Within the *teacher-as-facilitator* discourse grief is seen as a natural, acceptable part of life and human existence. It may also be considered 'normal' in that grief happens to all people at some time in their lives despite the fact that people respond differently and are affected in different ways. This perspective of change, loss and grief is derived from a broader view of health as holistic (Tasker 1996/97) involving the physical, mental/emotional, social and spiritual dimensions of wellbeing.

4.1.2.1 Beliefs about Change, Loss and Grief

Within the *teacher-as-facilitator* discourse, grief seems to be accepted as part of a 'healing process'. Jan's perspective of grief as a process may be influenced by her own personal experience of working through grief in this way, whilst Hazel seems to use the idea of a process as a tool to enable people to deal more easily with their feelings.

I am probably a good teacher for teaching [change, loss and grief] because I had been through a loss but realised that the grief was part of the healing process (Jan)

The view of grief as a process seems to emphasise changing connections with the loss, rather than disengaging and merely recovering from grief (Klass, Silverman and Nickman, 1996). Within this model, the teacher's role would be to facilitate children's understanding of the individual process of grief and enable them to acknowledge the loss, but also accommodate a healthy perspective towards their grief experience.

From our perspective, sometimes grief is kept quiet, but this is bringing it out into the open and showing that it was a process. Yes it has feelings attached to it but if you understood it from what the process was, it was easier for people to deal with (Hazel)

Hazel's perspective seems to straddle the two discourses as she implies that 'dealing with' the situation is of primary importance when experiencing grief. This belief is quite similar to the

concept of health revealed in the *teacher-as-expert* discourse and illustrates how Hazel fluctuates between and may operate within, the two different discourses.

It is interesting to note that Jan's personal experience and subsequent awareness of grief as a process did not seem to alter her practice in the classroom as described in the Teacher-As-Expert Discourse 4.2.1.2: Teaching Strategies and Approaches. This highlights the difficulty of resisting the dominant *teacher-as-expert* discourse.

4.1.2.2 Change, Loss and Grief Within the Curriculum

As a learning context within the official curriculum, change, loss and grief in the *teacher-as-facilitator* discourse is seen as a necessary life skill that requires comprehensive implementation across all levels of the school. This reveals a different perspective from the expert discourse in that it is acknowledged that planned and deliberate teaching about change, loss and grief is required for learning these life skills.

Jan's perspective shows her holistic view which is illustrated in this discourse. Jan describes change and loss as a 'normal' part of life. She uses the word 'normal' within the context of learning a life skill which seems to imply a perspective that change, loss and grief is an accepted part of human existence that will happen to all people at various stages in their lives. Jan appears to be aware that teaching about this may help children to develop strategies to enhance their own well-being and the well-being of others. This understanding is consistent with the conceptualisation of change, loss and grief within *Health and Physical Education in the New Zealand Curriculum* (Ministry of Education, 1999).

It is just normal to have loss and normal to have change (Jan)

...learning to deal with loss and change and grief when you are this age is surely going to set in place strategies as it goes on, that's the way I see it as just being a life skill (Jan)

...so that it becomes just another life skill that we are all learning, so that we take it on board as being as normal as learning about sexuality education or as normal as learning maths, that's what we want it to be eventually isn't it, it's just that integral part of education (Jan)

Beginning this topic in the junior school and developing it in an ongoing way throughout the school is a recurring theme for Jan. This perspective supports Jan's belief that change, loss and grief needs to be taught and introduced to children from a young age in order for it to be most beneficial in developing life skills.

...if we can teach an understanding of what it is to have change in your life and loss in your life at six years old, perhaps they would better be able to cope with these things when they hit them later on (Jan)

If we start there [at year 1] it is going to be a lot easier when you get older, I mean... once you have actually introduced it you can build on it (Jan)

Jan seems to have a clear understanding of the purpose of this topic within the curriculum and also reveals ideas about how she views teaching and learning within health education. She appears to view the teaching of this topic in the early years as a way to ensure that skills are in place to enable children cope with change or loss in later years. She also has clear ideas about the spiral, progressive nature of learning and sees this topic as best delivered in an ongoing, regular and planned way throughout the school. What is interesting here, is that Jan still describes grief as a 'problem' which perhaps highlights the deeply entrenched influence of the dominant expert discourse.

I think it has actually got a very important place because it is like any of these things that the younger you can start addressing some of these problems the easier it is going to be to deal with them later on (Jan)

Jan also describes the ability of children to express feelings, talk to others and engage in help seeking behaviour as important skills that need to be developed. She is aware of the need for children to be taught how to support themselves and others cope with situations of loss and grief.

I think the important thing is that the children if they need to talk about it they know there is somebody they can talk about it to (Jan)

We are looking at the grief and the loss from different angles, so how you feel about it, how you help other people feel about it, how they help you (Jan)

It seems that Jan has a much stronger conceptualisation of change, loss and grief than Hazel, however both teachers share a similar discourse when expressing their beliefs about the topic. When conceptualising change, loss and grief in the official curriculum it appears that Jan and Hazel operate within different discourses. A possible explanation for this difference could be Jan's previous involvement in professional development whereby Jan was able to explore her existing ideas with others and develop new understandings about change, loss and grief. Jan seems to reflect this professional understanding in her beliefs about change, loss and grief within the curriculum, where as Hazel lacked this exposure, and works more within the dominant *teacher-as-expert* discourse.

4.2 Teaching and Learning Within a Health Education Context

This theme explores the particular teaching and learning approaches and strategies that Jan and Hazel described, indicated in their written planning and revealed in their classroom practice. It also describes the particular classroom environment that operated which seemed to underpin the particular teaching and learning strategies used. Examples of how Jan and Hazel seem to operate within or between the *teacher-as-expert* and *teacher-as-facilitator* discourses are explored.

4.2.1 Teacher-as-Expert Discourse

Within the *teacher-as-expert* discourse, the dominant approach to teaching and learning is the teacher directed/transmission approach whereby knowledge is transmitted from the teacher expert to the students. The teacher judges the correctness of students' responses, which seems to create an environment whereby the teacher feels safe and 'in control'. The students are relatively passive in the learning process with mostly teacher directed activities used that emphasise the replication of correct responses.

4.2.1.1 The Classroom Environment

Within the *teacher-as-expert* discourse, the emphasis seems to be focused predominantly on the *teacher* being in control within the classroom environment. Jan appears to want to approach the topic in a way that is safe, by enabling her to feel comfortable about the material

taught and the children's possible reaction to it. Hazel describes her concerns about any possible negative reactions that may arise from both the children and the parents and emphasises the need 'to be prepared'. This fear of being surprised may link to both teachers' desire to maintain control and stay within their own comfort zone. Jan and Hazel's concern with maintaining control reflects a consistency with their beliefs about change, loss and grief as a topic previously described in 4.1.1.1 Beliefs About Change, Loss and Grief, and illustrates that teachers' practices are influenced by their beliefs (Clark and Yinger, 1977).

Well you make it safe by probably choosing something like loss of a pet or loss of a grandparent or something that isn't going to bring up, I mean you know your class and you know which ones to steer clear of (Jan)

I don't think anyone would like to be dropped in the deep end and take something like that (Jan)

...when you're bringing in a new curriculum you are apprehensive because you don't know what's going to come out of the children so you have to be prepared for it (Hazel)

I don't think necessarily that change, loss and grief has been put in there to deal with the terrible losses (Jan)

Tonkin (1995) argues that children need to learn how to cope with loss, not be protected from grief. She believes that adults may consciously or unconsciously try to deny children's experiences because they try to protect them from pain. Tonkin (1995:24) suggests that "children do not need protection from their feelings but support in them". Operating within the expert discourse would seem to deny children the opportunity to learn from their own and others experiences, particularly if these experiences elicit emotional responses.

Hazel in particular seems aware of the potential that this unit may have to elicit responses that *she* may find uncomfortable. Hazel operates within this expert discourse in describing her desire to prevent any reactions that she feels unable or ill-equipped to deal with.

Well you might know the experiences because you're in touch with their families and things like that, but the scary part is that you don't want to upset anybody or unravel any situations with the children about loss (Hazel)

I think it's just a little scary that you don't want to step on anybody's toes and you don't want to upset people (Hazel)

If a family has just split up and you're talking about how they feel, how they feel when they're lonely; how they feel when they've lost something... some families might say you're stirring up problems (Hazel)

It was scary in a way for us because we did not know what else was going to come up (Hazel)

Another aspect of feeling safe and being in control was in understanding the particular terminology that this new learning context brought. Feeling safe and operating as an 'expert' may have encouraged Jan to insist that this is not a new context, just one that has been renamed.

It [change, loss and grief] has never really been part of our terminology as a teacher (Jan)

This new terminology is threatening to some people who don't feel as though they are keeping on top of things when really they are, its just renaming something that they have probably done for years (Jan)

I think they are a bit silly the way they keep bringing in new terms and changing things. We have just renamed a lot of things that we are already doing and that perhaps is the frightening thing for some people (Jan)

Initially, Jan felt unsure about what the topic would require of her as a teacher. Professional development helped Jan to 'unpack' the topic and enable her to feel more comfortable about its content and implementation.

I think initially when we looked at it we didn't quite know what we were going to be dealing with... what did you mean by change, loss and grief? (Jan)

It is not until you actually unpacked it and sat down and gone through it, it is far more user friendly than the terms present first of all (Jan)

4.2.1.2 Teaching Strategies and Approaches

Within the *teacher-as-expert* discourse, the dominant approach to teaching and learning is the teacher directed/transmission approach. In this role, the teacher assumes responsibility for delivery of the knowledge and the students are involved passively in receiving that knowledge. Both Jan and Hazel seemed to operate within the dominant expert discourse when implementing this unit in the classroom.

In Jan's classroom, most days began with a story followed by question time. The questions asked by Jan mainly related to the story although occasionally questions were asked of the children that related to their own life experience. It appeared from these exchanges, that particular knowledge was being sought that was directed very much by Jan rather than from the children themselves. A large part of the lesson was spent sitting and listening, apart from an occasional think, pair, share activity that took place on the mat. The children did not appear to be actively engaged in exploring their own existing ideas. As the expert, Jan seemed to direct most of the learning and controlled the children's choice of groups during one of the role-play activities. A task-sheet activity that was intended to reinforce the intended learning, concluded each lesson.

You talked about making it real to the kids. How could you do this? (Interviewer)

You sometimes have to have a concrete example or a concrete thing that they can do that makes them realise what you are on about. I mean I could sit there and talk all day but it is not necessarily going to stay in their head (Jan)

Despite this assertion, the task sheet activities that seemed to be Jan's concrete example for the children did not always seem to relate to Jan's learning intention and were not followed up with any discussion of the learning following the activity. It appeared from observing the children *busy* at work that completing the task became more important than the actual learning that was intended as a result of the task. Also, a large part of Jan's teaching approach

seemed to involve the children sitting and listening which was the opposite of what Jan intended. Using this strategy did not appear to be successful as the following excerpt from my observation journal illustrates.

*The **third** story that Jan read was about Dan. During the story the children were getting very restless, wriggly and in-attentive as they had been sitting for about 40 minutes. At the conclusion of the story, Jan had to provide a lot of the answers for them. She finally asked the children to stand and stretch to settle them. I was surprised that Jan used this lengthy question and answer approach with her junior class. After the lesson Jan commented at how 'sluggish' the kids were and remarked that teaching them was really hard work.*

(Field note observation: 13 August, 2002)

In Hazel's classroom, the way that the lessons were structured and delivered also seemed to reflect a teacher directed approach. Keeping the children quiet reinforces the importance of the teacher being in control and in charge of directing the learning.

Because it's new, you've really got to know what you're doing all the way through. You've got to have planned, have your stuff ready, maybe change the seats around in your class to get the kids to sit in an appropriate place so they're all sitting quietly together (Hazel)

Like Jan, a similar format was used each day for the teaching and learning approach. A formal teaching approach was used for each lesson with Hazel at the front of the classroom and the children on a mat area near her. Following the whole class introduction the children conducted their 'work' individually at their desks. Hazel roamed around the class positively reinforcing neat, full bookwork and the 'correct' answers.

We will grade you achieved, merit, excellence once you have some actions that help people. [Two girls arrived late, Hazel explained the task].

(Field note observation: 13 November, 2002)

During some of Hazel's lessons, several groups of children (not part of Hazel's class, but present in her class) were engaged in other tasks that seemed to disturb the classroom

environment. It seemed that very little group work took place involving students exploring their own ideas and co-constructing new understandings about the topic. Discussion of the *learning* at the conclusion of each lesson was brief and lacked a clear process. Despite this, Hazel seemed satisfied with the way the unit was presented and the learning that she felt occurred.

So what were the highlights of the unit do you think? (Interviewer)

Oh they made some posters and things and they worked with their friends too. A lot of talking together. So the highlights would be understanding what this thing [change, loss and grief] is (Hazel)

Can you tell me about the sorts of teaching strategies that you used? (Interviewer)

Well I used group work, I used discussions of things, I used whatever was in the [Curriculum in Action] book. But each time we started we did a review of what we'd done and built on it (Hazel)

That unit was very good, it taught the children a lot (Hazel)

The way the lessons were structured and delivered could have been a reflection of Hazel's apparent lack of understanding of the topic herself.

Burns and Lash (1988) argue that teachers' knowledge, or lack of, has shown to be a major constraint to teachers when implementing curriculum. This appeared to be the case in Hazel's classroom. A study by Elbaz (1983) found that teachers' knowledge is actively related to their world of practice. The emphasis of the lessons in Hazel's classroom appeared to be on the children completing activities in their 'health books' with very little processing or discussion with others about their learning. This would seem to indicate that Hazel lacked knowledge of not only the topic but also how to facilitate effective learning in the classroom. This approach reflects Hazel's operation within the *teacher-as-expert* discourse.

It would seem that professional development in all areas of teacher knowledge (see for example Shulman, 1986) is critical to ensure that teachers are professionally prepared to provide the best possible learning experiences for children. Hazel had not sought any professional development in change, loss and grief prior to implementing this unit which

probably influenced not only her own knowledge but also the way she approached and delivered lessons in the classroom.

Prior to implementing this unit of work, Jan and Hazel used the official curriculum and the supporting resources to plan what they intended to teach in the classroom. Teacher's plans are a reflection of their thought processes, theories and beliefs and the intended learning that is hoped will take place in the classroom. Unit plans reflect a teacher's decision making at the classroom level (Barr and Gordon, 1995) and provide an insight into how and what teachers plan.

Teachers' written plans on their own are not enough to gauge effective classroom practice, but can be used as *one* form of teacher's thinking to enable intention to be contrasted with practice. Willis (2002) suggests that one of the keys to good teaching is in the planning but a lot of it is in the actual performance. In this study an analysis of Jan and Hazel's written plans revealed that Jan appeared to have a much clearer understanding of the official curriculum in terms of planning, than Hazel. This was shown by Jan's clear links to appropriate achievement objectives and her articulation of the conceptual framework within her planning (see Table 4). Links to the conceptual framework in Jan's planning seems to demonstrate her ability to apply the underlying philosophy of the curriculum to a written plan. This is one of the crucial components of understanding the intent of the *Health and Physical Education in the New Zealand Curriculum* (Ministry of Education, 1999) that professional development is intended to address.

In contrast, Hazel appeared to have difficulty linking specific learning outcomes and in to a clear understanding of the conceptual framework in her planning. This could be due to a lack of knowledge of the official curriculum, its philosophy and also how to apply the key concepts to a written classroom plan. It could be suggested that this reflects a lack of professional development in health education and specifically in the context of change, loss and grief.

Table 4 provides an analysis of Jan and Hazel's unit of work by comparing each component of their written plan to my own recommendations as an adviser with some expertise in health education. Jan and Hazel's actual unit plans are provided in Appendix 4 and 5.

Table 4. Summary and Analysis of the Planned Curriculum

Expectations of the Official Curriculum for Teacher Planning	Jan's Written Planning	Hazel's Written Planning
Purpose of the unit Can identify broadly what the unit hopes to achieve in terms of student learning	Students will develop an understanding of change, loss and grief and learn a variety of strategies to enable them to cope with their own change, loss and grief, help others who need support and build both individually and collectively a caring, supportive environment	A broad vision for student learning subsumed in unit objectives.
Key Area of Learning Can identify that change, loss and grief is part of the mental health key area of learning	Mental health identified as the appropriate key area of learning	'Mental' identified as the key area of learning
Achievement Objectives Can identify appropriate achievement objectives from the curriculum that reflect the learning intentions	Appropriate achievement objectives selected from strands A, C and D	Achievement objectives selected from strands A, B & C and underlined on the unit plan.
Specific Learning Outcomes Can identify learning outcomes that clearly link to the achievement objectives, are specific and measureable and reflect the purpose of the unit	Intended learning clearly linked to appropriate achievement objectives. Learning outcomes clear, measureable and linked to the purpose of the unit	Learning outcomes recorded
Learning Activities Can identify appropriate, interactive learning activities for each learning outcome	Some confusion between the intended learning and the learning activity. Activities described followed similar format: discussion followed by an activity. Used the Curriculum in Action resource to select some activities	Activities described for each learning section from the Curriculum in Action resource
Teaching Approaches Can identify teaching approaches that reflect effective teaching and learning pedagogy and the underlying concepts of the curriculum	Teaching approaches embedded in the unit. Lots of teacher discussion	Types of teaching approaches identified from a generic unit plan. Indicated that cooperative learning, role play, direct instruction and behavioural strategies would be used.
Assessment Can identify assessment types and methods that reflect the information required for assessment	Appropriate assessment methods identified including peer/self assessment	Assessment method included teacher observation
Essential Skills Can identify appropriate essential skills that are included in the unit	One general essential skill identified, self management	Two essential skills identified, communication and social and cooperative.
Conceptual Framework Can identify links within the unit to the key concepts of the curriculum: hauora, health promotion, socio-ecological perspective and attitudes and values	All four concepts described accurately with clear links reflected within the unit	Concepts identified on the unit plan but not described
Resources Can identify appropriate resources that reflect the philosophy of the curriculum	Identified and used the Curriculum in action resource	Identified and used the Curriculum in action resource

Guidelines sourced from: *Health and Physical Education in the New Zealand Curriculum* (Ministry of Education, 1999) and *Change, Loss and Grief: Curriculum in Action* (Ministry of Education, 2000)

It must be remembered however, that good planning does not necessarily constitute effective practice and vice versa. Willis (2002:9) suggests that "most of the important things about teaching are not represented in those plans". Many other factors must be considered which is why the data in this section is collected from a variety of different sources.

What is interesting from Jan and Hazel's planning is that both teachers used the supporting resource *Change, Loss and Grief: Curriculum in Action* (Ministry of Education, 2000) extensively and based their planning upon this. Teachers are encouraged to use this tool as a guide as it outlines effective practice and a clear process for implementing change, loss and grief in the classroom. It could also be argued that this resource provides a 'foolproof' way to plan even for teachers with very little background knowledge, ensuring that the written plan is technically sound even if the classroom practice is not.

I was really reassured by these curriculum in action books that came out. I wouldn't like to be writing a lesson without something like that as a back-up because that really clearly defines what we should be doing and how we should be doing it (Jan)

That was my little bible [the Curriculum in Action] that I used to follow and I just sort of built on those ideas (Jan)

I felt confident that it [the Curriculum in Action] had been well written. I felt as a teacher that I was well supported with the documentation (Hazel)

Interestingly, Jan modified the unit she had planned as she appeared to believe that the activities in the resource book were not 'concrete' enough for her children. This perspective is interesting given that most of the unit was planned using the *Change, Loss and Grief: Curriculum in Action* (Ministry of Education, 2000) resource designed to describe effective practice for children at this level. Perhaps the *teacher-as-expert* discourse that Jan was operating within conflicted with the *teacher-as-facilitator* discourse advocated in the resource.

I haven't changed the basic ideas but I have changed how I've gone about it because I decided that when I looked back over my initial plan that I wrote in the comforts of home in the holidays and when you get back with the reality of the classroom it has to be actually a lot more concrete at this level (Jan)

Hazel illustrates her reliance on the Curriculum in Action resource when teaching this unit, by using the resource to teach directly from. At times, Hazel read sections of the resource as material was being handed out to the students which seemed to indicate that she was

unfamiliar with its content. This contrasts with Hazel's previous intention to be well planned because this is a relatively new topic, as discussed in 4.2.1.2 Teaching Strategies and Approaches.

Hazel asked the children to write on paper actions that they could do to help someone else. The actual activity in the Curriculum in Action however is about learning the skills to help yourself first ... the process followed was not that as outlined in the Curriculum in Action.

(Field note observation: 13 November, 2002)

It appears from previous discussions with Hazel that she believed that this resource would be sufficient to deliver this unit and that implementing it according to what the resource said would ensure a successful teaching and learning approach.

I really think they've made it very simple to follow, they've made it user friendly and it's not complicated to deliver (Hazel)

If the words are in the book use them because you will not offend people and when parents come along or complain you can show them this book and say these are the words I said and the parent can then understand that that's part of what happens (Hazel)

What is concerning is that Hazel believed that she was implementing the Curriculum in Action resource as the writers of the resource would intend and believed that using this resource was sufficient for an effective teaching and learning process. This belief consistent with the *teacher-as-expert* discourse, reduces the role of the teacher to a technician and encourages the development of 'teacher proof' materials that can be merely delivered. Unfortunately Hazel's classroom practice highlights the danger of this approach.

I'll more than likely follow it to a tee, follow the directions. I'll probably do more this time than I have to because it's the first time we have done it at school (Hazel)

I used group work, I used discussions of things, I used whatever was in the book (Hazel)

I'm going to use the Curriculum in Action, why use anything else when it's all done for you? It's been worked out by people who spend a lot of time working that out so this is what we will do (Hazel)

By analysing the planned curriculum of Jan and Hazel and comparing this to their classroom practice, it seems that the use of excellent supporting resources and even professional development, does not seem to be sufficient to influence practice from within the dominant expert discourse. This highlights the importance of specific and effective professional development for teachers in not only developing knowledge about the particular context to be implemented, but also in developing the knowledge and skills in effective teaching and learning pedagogy as well.

4.2.2 Teacher-as-Facilitator Discourse

Within the *teacher-as-facilitator* discourse, the dominant approach to teaching and learning is the student centred/constructivist approach whereby knowledge is constructed and reconstructed with the teacher and between students (Brooks & Brooks 1993 as cited in Ubbe et al. 1999). In a constructivist approach, students' life experiences and existing ideas are acknowledged, explored and developed. The teacher facilitates learning by posing questions, seeking clarification and promoting interactive dialogue between students in the classroom. In this way, the students are active participants in the learning process with activities designed to elicit students' thinking and application of knowledge, skills and attitudes to authentic issues and problems. The classroom environment as a setting is one of shared control by the teacher and students to ensure learners feel safe and valued.

4.2.2.1 The Classroom Environment

Within the *teacher-as-facilitator* discourse, neither Hazel nor Jan demonstrated an environment of shared control with students in their classrooms. Instead the emphasis seemed to be focused on the teacher being adequately prepared to provide a safe emotional environment for the children. Jan describes the importance of knowing the children prior to teaching this topic and highlights the need to set clear boundaries in the classroom to ensure a safe learning environment.

I think you just have to be aware of the dynamics of the class and which things are going to be awkward or uncomfortable for the children (Jan)

I think it is a good time to do it when you have actually had a couple of terms with the class (Jan)

Having some sort of guidelines down for what people say and what they don't say... is probably quite important (Jan)

Hazel indicates her concern for the emotional safety of the children by describing her intention to inform parents of the intended unit of learning prior to its implementation. The reason for this is probably to prepare children for learning in a positive way whilst also encouraging dialogue and communication between home and school.

Some of the backgrounds of the children who have experienced loss, disappointment and I was concerned for some of them. So all the parents got a note saying that we were doing it (Hazel)

Although the actual letter contained within the Curriculum in Action resource that informed parents of the intent and content of the unit did not go home, parents were informed that the topic would be taught through a more general newsletter. The gap between intention and action is highlighted by this example and may indicate how barriers within the school setting facilitate Hazel's struggle within the dominant discourse.

4.2.2.2 Teaching Strategies and Approaches

Within the *teacher-as-facilitator* discourse, the approach to teaching and learning involves a student centred constructivist approach. Using this approach, the teacher assumes the role of a facilitator and the students are actively involved in the learning process in order to construct their own knowledge and be able to act on this knowledge. Social interaction with others is critical for the co-construction of meaning and fundamental to this process (Jaworski, 1994). Jan and Hazel indicated some awareness of aspects of this discourse in their planning by documenting activities and teaching strategies indicated in the *Change, Loss and Grief: Curriculum in Action* (Ministry of Education, 2000) resource. Jan also described in her

interview, student centred approaches consistent with the facilitator discourse that were *supposed* to happen in the classroom. The following examples highlight this intention;

We are looking at grief and the loss from different angles, so how you feel about it, how you help other people feel about it, how they help you (Jan)

I try to keep it as tangible as I can rather than getting it too far away so they can't understand it, bring it back to things they will relate to (Jan)

Jan shows an awareness of exploring grief from a variety of perspectives and ensuring that the activities are related to children's experiences. In practice however, the dominant teacher directed approach described in the expert discourse took precedence. Professional development through participation as a learner in child centred, constructivist approaches did not seem to alter the way that Jan operated in the classroom with the *teacher-as-facilitator* discourse largely absent from observed practice. The section on Teacher as Expert Discourse 4.2.1.2: Teaching Strategies and Approaches explores this in more depth.

4.3 Curriculum Implementation

This theme describes some of the key issues and barriers that Jan and Hazel felt would or could impact on the implementation of this unit in the classroom. The main issues identified from the data are teacher's own issues, resistance to change and professional support. The majority of the data provided was collected from Jan, as Hazel indicated that she didn't think the unit was hard to teach at all and couldn't identify any barriers or issues that would influence the implementation of this context in the classroom. The issues that have been provided by Jan provide a useful context for understanding how teachers' beliefs about teaching and learning and their actual practice may be shaped or constrained to fit within the dominant *teacher-as-expert* discourse. As well as these issues the very nature of teaching and working within a school with its own particular culture provides many unique challenges. My own experience of being a classroom teacher brings to mind the hectic pace of teaching from juggling numerous curriculum areas, managing assessment requirements, coping with the needs of children, parents' expectations and management demands. The broader context of school structures and practices although not specifically elaborated here, must also be

considered since they impinge on the particular discourses that teachers unconsciously operate within.

4.3.1 Teacher's Own Issues

During Interview 1 Jan identified a lack of confidence by some teachers about the content of the topic change, loss and grief as a barrier.

It's a personal feeling about the content that is the blockage, not the actual being able to teach it (Jan)

Jan seems to suggest that understanding the content would enable her to teach any topic as she has the teaching skills but not necessarily the content knowledge.

Jan identifies this lack of confidence about the content as being related to the personal attributes and issues of individual teachers rather than the topic itself. She implies that teachers have been trained to possess the technical generic teaching skills, but may lack confidence to implement the topic due to their own personal feelings, issues or fears.

It's a self-induced problem to teach change, loss and grief (Jan)

A teacher's own personal issues and loss experiences may make this a difficult topic to teach in the classroom (Milton, 1999). A study by Brown (1999) showed that teacher's personal experiences play a large part in how confident they feel in addressing certain subjects with children. If a teacher's own prior experiences of a grief situation have been particularly negative, or they have unresolved grief then it is likely that this topic will pose personal difficulties for the teacher. All adults have had a variety of life experiences that inform their work in the present and provide an "experiential" basis for teachers' practical theories (Zeichner and Liston, 1996). Previous negative life experiences could influence the implementation of change, loss and grief in the classroom as teachers may avoid the topic completely or use an integrated approach consistent with the *teacher-as-expert* discourse to ensure that their own personal comfort is protected.

Anyone who has difficulty with it themselves is perhaps going to have difficulty teaching it (Jan)

I suppose how you deal with it yourself will have some ongoing effect with how you are going to teach it (Jan)

People perhaps have bad feelings or sad or overpowering feelings from their past or from their experience, it may cloud their vision when they are teaching [change, loss and grief] (Jan)

Some people have a lot of baggage and stuff that they were fighting their way through, let alone try and teach this to someone else. I think that could be a real barrier (Jan)

A teacher's own issues and prior experiences may make it difficult to consider an alternative discourse if that discourse challenges them to confront their own issues or fears. It would seem 'safer' for many teachers to remain within the dominant discourse than to face a new and unfamiliar way of operating with children, despite the benefits for children or the requirements of the official curriculum.

4.3.2 Resistance to Change

Teacher's resistance to change was also identified as a barrier. Evans (1993 as cited in Hill, Hawk & Taylor, 2001) argue that resistance to change is inevitable and that a commitment to the innovation must be established prior to implementation. Interestingly the experience or inexperience of a teacher was not necessarily felt to be important when teaching this topic but it was the willingness to adapt to change that was seen as significant. As with the previous barrier, the crucial factor identified was related to an individual's personal qualities or attributes that enabled them to be identified as a 'good' teacher who would be prepared to implement a new and unfamiliar learning context such as change, loss and grief.

I think some people get sort of stuck into what they are used to teaching and don't like changing (Jan)

Some experienced teachers might be more anti trying new things than beginning teachers (Jan)

In investigating educational change Fullan (1982) has identified several factors which support and inhibit curriculum implementation. One of the factors identified was the personal characteristics of the teacher. If teachers need to feel in control as described in the *teacher-as-expert* discourse, then this may influence the way that they adapt to and implement new teaching and learning contexts such as change, loss and grief.

McLaughlin (1977 as cited in Snyder et al. 1992) argues that teacher attitudes are critical and that without professional motivation, teachers will not make the extra effort required.

I think it is probably more just a personal thing for anyone who enjoys trying new things will give it a go with sort of a good attitude (Jan)

A teacher's own personal characteristics and attitudes may influence the degree of implementation of change, loss and grief in the classroom and school. Teacher attitudes could also affect a teacher's willingness to prioritise and then attend professional development in this area.

4.3.3 Professional Support

Jan's attendance at professional development workshops have been in contrast with Hazel's lack of professional development in change, loss and grief. From my observations and interviews with Jan it appears that this professional support increased Jan's knowledge about the topic, her ability to translate this into a written plan and her confidence to implement this learning context in the classroom. Jan believes that the clear guidance and direction provided by this support has enabled her to more effectively implement this learning context in the classroom.

With new topics if you get a bit of guidance and role modelling on that it does make it a lot easier (Jan)

Both Jan and Hazel used the *Change, Loss and Grief: Curriculum in Action* (Ministry of Education, 2000) resource material to support the implementation of this unit.

I was really reassured by these curriculum in action books that came out. I wouldn't like to be writing a lesson plan without something like that as a back-up because that really clearly defines what we should be doing and how we should be doing it (Jan)

This year I taught with the [Curriculum in Action] book open – I'd read it, I knew what I was going to do but I just felt more confident when I looked at making sure I had the right words in the right place (Hazel)

However, it appears from the data that despite professional development workshops and supporting resource material, both Jan and Hazel continued to operate within the existing *teacher-as-expert* discourse when implementing change, loss and grief in the classroom. This is not to deny the importance of professional development and resources as a way of increasing teacher confidence and knowledge about the topic, but what it seems to do is highlight the need to reconsider the way that teachers are professionally prepared to implement curriculum in a way that will facilitate change towards a more effective *teacher-as-facilitator* discourse.

Chapter 5 discusses in more depth the implications of the data described in this chapter, limitations of the research process, implications for my own practice and explores some possible questions for further research.

CHAPTER 5

DISCUSSION & CONCLUSION

The purpose of this thesis was to investigate how change, loss and grief in *Health and Physical Education in the New Zealand Curriculum* (Ministry of Education, 1999) was conceptualised and implemented in the classroom. The perspectives and practice of two primary school teachers were explored through making explicit the *teacher-as-expert* and *teacher-as-facilitator* discourses they operated in. By exploring these discourses, teachers may be better able to understand the ways that curriculum are conceptualised and be informed about how their own practice in the classroom may reflect and be shaped by particular beliefs and ideologies. The study highlights the complex issues involved in implementing curriculum and suggests alternative approaches to teacher professional development that may begin to change teacher practice from within the dominant *teacher-as-expert* discourse.

This chapter will summarise the key themes and implications that emerged from the study, discuss the limitations of the research process, suggest implications for my own practice and indicate some possible questions for further research.

5.1 Key Themes and Implications

In this section the three key themes and implications that have emerged from the findings in this study are explored, including links to broader issues highlighted in the literature.

5.1.1 Teacher's Perspectives of Change, Loss and Grief

Teachers' beliefs and theories influence their actions (Stuart and Thurlow, 2000) with existing beliefs, even if they are faulty, likely to take precedence over intended actions (Swann and Brown, 1997). Exploring the existing beliefs, theories and perspectives of teachers including those beliefs that operate unconsciously (Clark and Yinger, 1977) is necessary to bring about change in teacher thinking, action and practice.

In this study, teachers' perspectives have been analysed according to two discourses. These discourses have served as a framework to explore how these perspectives have influenced teacher decision making and classroom practice. Within the *teacher-as-expert* discourse change, loss and grief is viewed as an illness, needing to be 'fixed'. This perspective is

influenced by a broader view of health as an absence of disease (Tasker, 1996/97) and is reflected in Jan and Hazel's personal beliefs about change, loss and grief and its inclusion as a learning context within the official curriculum.

Hazel seemed to operate strongly within this expert discourse while Jan existed at various times between this and the *teacher-as-facilitator* discourse. Within the expert discourse both Jan and Hazel seemed to believe that individuals should cope with and move on from their grief as soon as possible. The attachment theory proposed by Bowlby (1969 as cited in Klass, Silverman and Nickman, 1996) underpins this perspective and seems to have implicitly guided the way that this topic was conceptualised, planned and implemented in the classroom.

The personal perspective of change, loss and grief as an 'illness' was also reflected in Hazel's beliefs about this topic in the official curriculum. Hazel indicated that this topic is best covered incidentally when 'problems' arise as you would if you were unwell, rather than planned and implemented explicitly. This view as a reflection of the *teacher-as-expert* discourse ensures that any sensitive issues raised by the children are avoided and any challenges to the teacher's feelings of being in control are minimised. This position also implies that change, loss and grief can be implemented in an ad hoc way, which is in contrast to the intention of the official curriculum.

In contrast, within the *teacher-as-facilitator* discourse change, loss and grief is viewed as a natural part of human existence. This perspective is influenced by a broader view of health as holistic (Tasker, 1996/97) whereby grief is viewed as a process emphasises a changing connection, rather than detachment from a loss (Klass, Silverman and Nickman, 1996). Jan indicated some beliefs within this discourse due to her experience of working through a process of grief, however her views also reflected the dominant expert discourse. Jan's personal experience, although very powerful, was insufficient to change her beliefs about the topic and the way it was implemented in the classroom. It would seem that Jan's already existing ideas about change, loss and grief within a *teacher-as-expert* discourse took precedence over the beliefs that underpinned her personal experience which reflected more of a *teacher-as-facilitator* discourse.

The personal perspectives that Jan and Hazel had of change, loss and grief as a topic and as a context within the official curriculum have been discussed. From this analysis it seems

apparent that Hazel operates exclusively within the *teacher-as-expert* discourse while Jan's beliefs about change, loss and grief within the official curriculum enable her to operate at times, within an alternative discourse. It seems that the professional development Jan received, has enabled her to develop some understanding of the implementation of change, loss and grief within the official curriculum consistent with the *teacher-as-facilitator* discourse of best practice. From a fidelity perspective (Fullan and Pomfret 1977 as cited in Snyder et al. 1992) it appears that exploring teachers' underlying beliefs and theories as part of the professional development process is necessary to ensure the teacher understands the beliefs that underpin the intention, recommendations and implementation of the official curriculum.

It also appears that Jan's personal experiences have *better* prepared her to understand grief as a process rather than as an illness to recover from. This indicates that teacher's personal as well as professional experiences inform their ideas and beliefs and should be encouraged as a tool when reflecting on classroom practice. What is interesting however, is that Jan's grief experience did not prevent her from also operating within the dominant expert discourse. This evidence seems to support the views of Colquhoun (1992) and Munro (1991) who suggest that dominant discourses and powerful folklores have a strong influence over teachers and tend to protect existing practice and maintain the status quo. It seems apparent that an exploration of teachers' *explicit* and *implicit* beliefs and theories is necessary if a change in teacher thinking, action and practice consistent with a *teacher-as-facilitator* discourse is to occur.

5.1.2 Teaching and Learning Within a Health Education Context

The beliefs that Jan and Hazel had about change, loss and grief and its place within the official curriculum appeared to be operating unconsciously (Clark and Yinger, 1977) and seemed to have influenced the particular discourse that both teachers operated within. These beliefs largely determined the decisions made and the way both teachers approached and taught this unit in the classroom.

Within the *teacher-as-expert* discourse, the dominant approach to teaching and learning is the transmission approach whereby knowledge is transmitted from the teacher as an expert to the students as the learners. Student activities that reflect this discourse are mostly teacher directed with students passively engaged in the learning process. Teachers operating in this

discourse may do so to enable them to feel safe and in control of the learning environment (for example see Munro, 1991). Both Jan and Hazel reflected classroom practice consistent with the expert discourse in both the teaching strategies and approaches that they employed and in the controlled 'teacher safe' environment that they sought to create and maintain.

This trend would seem to suggest that the *teacher-as-expert* discourse is a powerful and dominant influence over teachers' practice (Colquhoun, 1992). One key strategy for exploring and challenging teachers' beliefs and practices within the dominant discourse is teacher professional development. In terms of teaching and learning approaches, professional development is needed to develop teacher knowledge and skills in constructivist teaching and learning pedagogy. Teachers should be provided with professional development opportunities to explore and critique their own ideas and beliefs about teaching and learning and reflect on their current classroom practice. Opportunities for implementing alternative constructivist pedagogy underpinning effective teaching and learning in health education within a *teacher-as-facilitator* discourse could then be explored as a part of the professional development process.

Professional development must also provide opportunities for teachers to develop knowledge of the aim, intent and conceptual understandings underpinning change, loss and grief within the official curriculum. By exploring these intentions teachers can clarify any new terminology, concepts or processes which they may find potentially threatening. A clear process for effective implementation in the school and classroom setting is also needed to ensure that teachers have the necessary skills and strategies in place to deal with issues that may arise as a result of the teaching and learning process. Opportunities to develop these understandings may help teachers to feel more personally safe and committed to the innovation (Hill, Hawk & Taylor, 2001), develop the skills to deal with sensitive issues and over time lessen the desire to control the classroom environment from within a *teacher-as-expert* discourse.

The planned curriculum provides some insight into teachers' knowledge of the curriculum and their intentions for teaching and learning in the classroom. Jan and Hazel's planning indicated that their written intention and actual classroom practice were in most instances, unrelated. In the case of Jan, professional development appeared to enhance knowledge and understanding of the planned curriculum but did not have a major effect on her classroom

practice. Hazel used the supporting resource *Change, Loss and Grief: Curriculum in Action* (Ministry of Education, 2000) extensively in her planning and teaching and despite this, the *teacher-as-expert* discourse remained dominant. This would seem to suggest that teaching and learning resource materials that model effective practice and professional development workshops in isolation are insufficient to change teachers' practice from within the dominant discourse. From my experience, too much emphasis on professional development in the past has been placed on providing feedback to teachers on their written planning which may bear very little resemblance to practice. In contrast, minimal time has been spent working with teachers on developing and reflecting on *practice* from within the classroom setting. Professional development I believe, must now focus on modelling and sharing effective practice within a *teacher-as-facilitator* discourse using existing resource materials whilst in the actual classroom environment. The critical friend (Bambino, 2002) or the coaching model (Joyce and Showers 1996 as cited in Hill, Hawk & Taylor, 2001) are strategies that have the potential to support an effective professional development approach.

5.1.3 Curriculum Implementation

Implementing any initiative in schools is a complex task due to the very nature of teaching and learning and the numerous factors that affect how a curriculum is implemented (McGee, 1997). Teachers are key determinants in curriculum implementation and affect the fidelity of implementation (Fullan and Pomfret 1977 as cited in Snyder et al. 1992) as they ultimately possess the freedom to decide whether to implement an innovation or not (Brown & McIntyre, 1993; Kosunen, 1994).

Jan described several issues that she felt would or could impact on implementing change, loss and grief in the school and classroom setting. These related to a teacher's own personal issues and characteristics, resistance to change and the professional support provided. These issues are important as they provide a context for understanding a teacher's involvement or movement within a particular discourse.

Teachers may lack the confidence to teach change, loss and grief due to their own personal issues, prior experiences or fears (Milton, 1999). If this is the case, teachers and schools may neglect to teach this topic, cover it incidentally or address it in an ad hoc way, in some classrooms but not in others.

Teacher's negative attitudes, lack of commitment and resistance to engage in change (Evans 1993 as cited in Hill, Hawk & Taylor, 2001) could also effect implementation. These issues could undermine the willingness of a teacher or school to participate in professional development opportunities. A teacher's personal experiences and resistance to change is likely to impact on the way the official curriculum is conceptualised, planned and then implemented in the classroom.

It seems that professional support is needed that addresses not only professional but also personal development. As the teacher's personal characteristics, attitudes and experiences are inextricably linked, this approach may help to develop teachers' personal comfort and confidence through exploring some of their own issues, attitudes and concerns prior to implementing this topic in the classroom. If an effective professional development process is provided that engages the teacher as a self-directed learner, resistance to change may be reduced.

The professional development that Jan received seemed to increase her knowledge about the topic as well as confidence in planning and implementation. User friendly and easily accessible teaching resources also provided both Jan and Hazel with confidence when planning for and implementing change, loss and grief in the classroom. What is apparent though, is that teacher resources in isolation and existing methods of professional development will continue to have little effect on teacher practice in the classroom, due to the pervasiveness of the dominant *teacher-as-expert* discourse. We must it seems, ensure that teacher's knowledge, underlying beliefs and pedagogical skills are included as part of professional and personal development if teachers' practice is to be changed.

Professional development plays a vital role in the implementation of curriculum and the ongoing development of teacher capability. But it seems that previous professional development strategies have been less than effective in changing professional practice (Education Review Office, 2000). This review suggests that we must now involve teachers in exploring their values and beliefs about teaching as well as the development of content and pedagogical knowledge, in order to change teacher practice. This can best occur in the classroom setting through strategies such as the critical friend or mentoring approach. If professional development is going to make a difference in the classroom then professional practice must change. This is the challenge that schools and teachers must now embrace.

5.2 Limitations of the Study

There are several limitations of the study that need to be considered for future research. As a beginning researcher I felt concerned at my probable lack of objectivity. My position as a health education adviser involved in developing and implementing professional development initiatives for teachers ensured my own personal and professional stake in the research. I was aware of my own biases, but found it difficult to distance myself from evaluating teacher performance as I would in my current role.

As an inexperienced researcher, I worried about my interviewing skills and technical competence. During one of the teacher interviews, I inadvertently lost some of my taped data by recording over material that had not yet been transcribed. Fortunately my written journal notes of the same interview were still able to be used, but loss of the taped interviews influenced the amount of detailed data that was available to me. My lack of experience in conducting interviews and particularly in effective questioning also became apparent during and after the research. The initial interview questions provided a useful starting point but it was in eliciting the depth of teacher's ideas following an initial response that I found difficult. Upon reflection it is this skill that enables rich qualitative data to be gathered and in my case this inexperience was apparent.

Another possible limitation of the study is its small size with only two teachers used. A greater number of teachers from a wider range of schools with different professional development experiences could have provided a greater breadth of data. However, the small size of the study was also an advantage. The use of a case-study approach enabled an in-depth, concentrated investigation of each teacher, which may not have been possible if the study had been larger.

A further limitation was the time that was available to conduct the research. The research was conducted on a part-time basis with the collection of data having to fit within existing work commitments. It was sometimes difficult to juggle classroom visits and interviews amongst other appointments or out of town travel. As a result of this, some of the interviews particularly in the case of Hazel were conducted quite some time after the classroom observations, which I believe interrupted the continuity of the research. In hindsight, it would

have been better to have had teacher reflections after each lesson rather than at the end of the whole teaching sequence when some time had elapsed.

Despite these limitations I believe the study has been generally successful and has provided me with the opportunity to consider my own practice in ways that I hope will ultimately benefit teachers and children.

5.3 Implications for my Practice

As a result of this study I have learnt a tremendous amount about teacher's ideas and practices when implementing a unit of work about change, loss and grief in the classroom. I have had to challenge my own assumptions about effective professional development and grapple with the complex issues, barriers and enablers involved in changing teacher practice. These insights have provided me with the opportunity to consider my own involvement in professional development and in the particular discourse that I, as a teacher educator, operate within. One of the challenges that I now face is to critique my own practice and beliefs from within a number of discourses and consider ways that I might work with teachers from within an *adviser-as-facilitator* discourse. This will require me to reflect on my own beliefs, theories and practices using my colleagues and mentors as part of a critical friend approach. It is only through an ongoing reflective process such as this, that my practice can be developed and change considered in a way that will ultimately benefit teachers. This research study has provided me with the tools to begin the journey, the challenge now is to negotiate the bumps along the way.

5.4 Questions for Further Research

Several questions have arisen from this study that are worthy of further research. These relate to the implementation of other contexts in health education, effects of professional development and student learning outcomes.

This case study has explored the conceptualisation and implementation of change, loss and grief in the classroom. However, it would be interesting to gather data about the implementation of other contexts within health education in the primary school setting, particularly those contexts that teachers may find challenging eg sexuality education. Further research in this arena could provide information about barriers to implementation that are

both generic to all curriculum implementation and also context specific. This information may offer guidance for professional development providers in teacher support and resourcing.

Further research concerning the effects of particular types of professional development on curriculum implementation would provide useful information for professional development providers considering particular models and methods that enhance teacher capability. Alongside this, research that investigates effective teaching practices leading to enhanced student learning outcomes is essential to building a cumulative body of knowledge linking teaching and learning.

BIBLIOGRAPHY

Annan, B., Kuin Lai, M., & Robinson, V. (2003). Teacher talk to improve teaching practices. *Set: Research Information for Teachers*, 1, 31-35.

Bambino, D. (2002). Critical friends. *Educational Leadership*, March. ASCD.

Barr, H., & Gordon, P. (Ed.). (1995). *The curriculum in the classroom*. Palmerston North: The Dunmore Press.

Bogdan, R., & Biklen, S. (1992). *Qualitative research for education: An introduction to theory and methods* (2nd ed.). Boston: Allyn and Bacon.

Bogdan, R., & Biklen, S. (1998). *Qualitative research for education: An introduction to theory and methods* (3rd ed.). Boston: Allyn & Bacon.

Brown, E. (1999). *Loss, change and grief: An educational perspective*. London: David Fulton Publishers.

Brown, S., & McIntyre, D. (1993). *Making sense of teaching*. Buckingham: Open University Press.

Burns, R., & Lash, A. (1988). Nine seventh grade teachers' knowledge and planning of problem solving instruction. *The Elementary School Journal*, 88(4), 369-386.

Burt, E., & Davison, L. (1998). Teacher professional development: Then, Now and in the Future. *New Zealand Journal of Educational Administration*, December, 13: 44-52.

Clark, C., & Yinger, R. (1977). Research on teacher thinking. *Curriculum Inquiry*, 7(4), 279-304.

Colquhoun, D., Tones, K., & Turner, B.S. (1992). *Health education: Politics and practice*. Victoria: Deakin University.

Connelly, F., & Clandinin, D. (1988). *Teachers as curriculum planners: Narratives of experience*. New York: Teachers College Press.

Cornett, J. (1990). Teacher thinking about curriculum and instruction: a case study of a secondary social studies teacher. *Theory and Research in Social Education*, 18(3), 248-273.

Crotty, M. (1998). *The foundations of social research*. Australia: Allen & Unwin.

Day, C. (1999). *Developing teachers: The challenges of lifelong learning*. London: Falmer Press.

Day, C., Calderhead, J., & Denicolo, P. (Eds.). (1993). *Research on teacher thinking: Understanding professional development*. London: Falmer Press.

Denzin, N., & Lincoln, Y. (Eds.). (1998). *Strategies of qualitative enquiry*. London: Sage Publications.

Department of Education, NZ. (1945). *The post primary curriculum: Report of the committee appointed by the Minister of Education, November 1942* (Thomas report). Wellington: Government Printer.

Department of Education, NZ. (1973). *Human development and relationships in the school curriculum: A discussion prepared by a working party* (Ross report). Wellington: Government Printer.

Department of Education, NZ. (1977). *Growing, sharing, learning: Report of the Committee on Health and Social Development* (Johnson report). Wellington: the Department.

Dickinson, P. (2001). *Guidelines for mentally healthy schools*. Auckland, NZ: Mental Health Foundation.

Dickinson, P., & Tonkin, L. (2000). *Change, loss and grief: A health education resource for secondary schools*. Auckland, NZ: Mental Health Foundation.

Elbaz, F. (1983). *Teacher thinking: A study of practical knowledge*. New York: Nichols.

Education Review Office. (1996). *Science in schools: Implementing the 1995 science curriculum*. Wellington: ERO.

Education Review Office. (1997). *Students at risk: barriers to learning*. Winter, 7.

Education Review Office. (2000). *In-service training for teachers in New Zealand schools*. Autumn, 1.

Ezzy, D. (2002). *Qualitative analysis: Practice and innovation*. New South Wales: Allen & Unwin.

Fullan, M. (1982). *The meaning of educational change*. New York: Teachers College Press.

Fullan, M. (1991). Curriculum implementation. In A. Lewy (Ed.), *The international encyclopedia of curriculum* (pp. 378-384). New York: Pergamon Press.

Glesne, C. (1999). *Becoming qualitative researchers* (2nd ed.). New York: Longman.

Glesne, C., & Peshkin, A. (1992). *Becoming a qualitative researcher: an introduction*. New York: Longman.

Good, T.L., & Brophy, J.E. (1994). *Looking in classrooms*. New York: Harper Collins.

Hattie, J. (2003). Presentation to Knowledge Wave 2003: The Leadership Forum.

Henderson, N., Bernard B., & Sharp-Light, N. (Eds.). (1999). *Resiliency in action: practical ideas for overcoming risks and building strengths in youth, families and communities*. USA: Resiliency in Action Inc.

Henderson, N., & Milstein, M. (1996). *Resiliency in schools: making it happen for students and educators*. California, USA: Corwin Press Inc.

Hill, J., Hawk, K., & Taylor, K. (2001). Professional Development: What Makes it Work? *Paper presented to the NZARE Conference*. Christchurch.

Jaworski, B. (1994). *Investigating mathematics teaching: a constructivist enquiry*. London: The Falmer Press.

Jensen, B.B. (1997). A case of two paradigms within health education. *Health Education Research, Theory and Practice*, 12, 419-428.

Kelly, A. (1999). *The curriculum: theory and practice* (4th ed.). London: Sage Publications.

Kennedy, L. (1997). Reviewing curriculum in the health and physical education learning area. *Primary Educator*, 3(6), 1-2.

King, P., & Occleston, S. (1998). Shared learning in action: Children can make a difference. *Health Education*, 3(May), 100-106.

Klass, D., Silverman, P.R., & Nickman, S.L. (Eds.). (1996). *Continuing bonds: New understandings of grief*. USA: Taylor & Francis.

Kosunen, T. (1994). Making sense of the curriculum: Experienced teachers as curriculum makers and implementers. In I. Carlgren, G. Handaland, & S. Vaage (Eds.), *Teachers' minds and actions: research on teacher thinking and practice* (pp. 247-258). London: Falmer Press.

Marland, P., & Osborne, B. (1990). Classroom theory, thinking and action. *Teaching and Teacher Education*, 6(1), 93-109.

Marsh, C. (1997). *Planning, management and ideology: Key concepts for understanding curriculum* (2). London: The Falmer Press.

Marsh, C., & Willis, G. (1995). *Curriculum: Alternative approaches, ongoing issues*. New Jersey: Prentice-Hall.

Marton, F. On the structure of teachers' awareness. In I. Calgren, G. Handal, & S. Vaage (Eds.), *Teachers' minds and actions: Research on teacher thinking and practice* (pp. 28-42). London: Falmer Press.

Mason, J. (1996). *Qualitative researching*. London: Sage Publications.

Matthews, C., & Grant, P. (2000). What constitutes effective professional development for teachers? *Paper presented to the CBM Literacy Conference*. Australia.

May, T. (1997). *Social research: Issues, methods and process* (2nd ed.). Buckingham: Open University Press.

McGee, C. (1997). *Teachers and curriculum decision making*. Palmerston North: Dunmore Press.

Michel, P. (1994). *The child's view of reading: Understandings for teachers and parents*. Boston: Allyn and Bacon.

Milton, J. (1999). Providing anticipatory guidance for our children: Loss and grief education. *Primary Educator*, 5, 13.

Ministry of Education. (1985). *Syllabus for schools: Health education in primary and secondary schools*. Wellington: Learning Media.

Ministry of Education. (1993). *The New Zealand curriculum framework*. Wellington: Learning Media.

Ministry of Education. (1999). *Health and physical education in the New Zealand curriculum*. Wellington: Learning Media.

Ministry of Education. (2000). *The curriculum in action: Change, loss and grief*. Wellington: Learning Media.

Ministry of Education. (2001). Implementing health and physical education in the New Zealand curriculum: a report of the experiences of a national sample of schools. *The Research Bulletin*, 12, 81-97.

Ministry of Health. (1998). *Child health programme review*. Wellington: Ministry of Health.

Mogensen, F. (1997). Critical thinking: A central element in developing action competence in health and environmental education. *Health Education Research*, 12 (4), 429-436.

Moore, A. (2000). *Teaching and learning: Pedagogy, curriculum and culture*. London: Routledge Falmer.

Munro, R. (1991). The folklore barrier to effective teaching. *Paper presented to the NZAMT Conference*. Wellington.

Munro, J., & Price, L. (2001). Teaching the New Zealand health curriculum-advocating for students, teachers and a just society: ethical dilemmas and pathways through. *Paper presented to the 17th World Conference on Health Promotion and Health Education*. Paris.

- Parker, J. (1995). *Understanding grief and loss*. Watson ACT: Australian Early Childhood Association Inc.
- Peters, J., & Thurlow, I. (2002). *Building resiliency in schools: An introductory handbook*. Invercargill, NZ: Essential Resources Educational Publisher Ltd.
- Shulman, L.S. (1986). Those who understand: Knowledge growth in teaching. *Educational Researcher*, 15(2), 4-14.
- Smith, D., & Lovat, T. (1991). *Curriculum: Action on reflection*. Australia: Social Science Press.
- Smyth, J. (2000). Reclaiming social capital through critical teaching. *The Elementary School Journal*, 100 (5), 491-511.
- Snyder, J., Bolin, F., & Zumwalt, K. (1992). Curriculum implementation. In P. Jackson, (Ed.), *Handbook of Research on Curriculum* (pp. 402-435). New York: Macmillan.
- Stake, R.E. (1995). *The art of case study research*. Thousand Oaks: Sage Publications.
- Stuart, C., & Thurlow, D. (2000). Making it their own: Preservice teachers' experiences, beliefs and classroom practices. *Journal of Teacher Education*, 51 (2), 113-121.
- Swann, J., & Brown, S. (1997). The implementation of a National Curriculum and teachers' classroom thinking. *Research Papers in Education*, 12(1), 91-114.
- Tasker, G. (1996/97). For whose benefit? The politics of developing a health education curriculum. *Delta*, 48(2)/ 49(1): 187-202.
- Tasker, G. (2001). *Student's experience in an HIV/AIDs sexuality education programme: what they learnt and the implications for teaching and learning in health education*. Unpublished doctoral dissertation, Victoria University, Wellington, NZ.
- Taylor, S., & Bogdan, R. (1998). *Introduction to qualitative research methods: A guidebook and resource* (3rd ed.). New York: John Wiley & Sons.
- Tonkin, L. (1995). *Change, loss and grief: A unit for primary and intermediate schools*. Wellington, NZ: Mary Potter Hospice.
- Ubbes, V. B., Black, J., & Ausherman, J. (1999). Teaching for understanding in health education: The role of critical and creative thinking skills within constructivism theory. *Journal of Health Education*, 30 (2), 67-72.
- Willis, S. (2002). Creating a knowledge base. *Educational Leadership*, March. ASCD.

Wittrock, M. C. (Ed.). (1986). *Handbook of research on teaching* (Third ed.). New York: Macmillian Publishing Company.

Zeichner, K. M., & Liston, D.P. (1996). *Reflective teaching: An introduction*. New Jersey: Lawrence Erlbaum Associates.

APPENDIX 1

Interview Questions

Interview 1: Jan and Hazel

Background Questions

1. How long in years have you been teaching?
2. Which class levels/years have you taught?
3. What do you enjoy most about teaching?

Exploration of Teacher's Existing Ideas about Change, Loss and Grief

1. What does change, loss and grief mean to you personally?
2. How do you think we as a society deal with change, loss and the feelings of grief?
3. How do you think a teacher's own personal experience might impact on what they plan and teach in the classroom? Do you anticipate anything like that for you?

Implementing Change, Loss and Grief in the Classroom

1. What do you think about the topic change, loss and grief being included within the *Health and Physical Education In the New Zealand Curriculum, 1999*?
2. How do you feel about implementing this topic in the classroom? Why?
3. In what ways have you taught this topic before?
4. How do you plan to implement the topic change, loss and grief in the classroom?
5. What do you plan to teach around this topic? Why have you chosen those particular aspects? Tell me about this.
6. What do you see are the key issues in implementing change, loss and grief in the classroom? Why are these issues for you? Do you think these would be issues for other teachers?
7. What have been the issues for you in preparing for the unit in terms of planning and preparation, teaching approaches to be used and classroom organisation?

Interview 2: Jan

1. Do you think experienced teachers would find change, loss and grief easier to implement than beginning or less experienced teachers? Why? Why not?
2. Do you think change, loss and grief is easier to implement in junior classrooms ie years 1 – 4 rather than years 5 – 8?
3. How do you think parents can support the implementation of change, loss and grief in the classroom?
4. Do you think the way some parents and teachers handle loss and grief is a barrier to the teaching of this at school? Why? Why not?
5. In the teaching unit you seemed to use a lot of stories. How did these stories add to the teaching and learning process?
6. Did any of the children's reactions during the unit surprise you? Is so which ones? How did you feel about these reactions?
7. Did the unit go as well as you thought? Did anything surprise you? What were the highlights? What would you do differently next time?
8. How did you feel about implementing this topic in the classroom? What things would make this unit difficult/easy to implement? Why?

Interview 2: Hazel

1. Tell me how you think the unit change, loss and grief went in your classroom? How did you feel implementing this unit?
2. Is there anything that you would do differently next time?
3. Do you think experienced teachers would find this unit easier to implement than experienced or beginning teachers? Why? Why not?
4. Was there anything you can think of that made this unit difficult to implement?
5. What do you think were the highlights?
6. Did you enjoy teaching this unit? Why?
7. One of your last comments to me was "that unit was very good, it taught the children a lot". What do you think the children learned?
8. Do you think the nature of this topic makes it more difficult to implement?
9. What do you think makes effective teaching practice?

APPENDIX 2

Two Paradigms of Health Education

Moralistic	Democratic
------------	------------

Concept of Health

Behaviour/lifestyle	Structural/societal living conditions, as well as lifestyle
Health as the absence of disease, an illness focus	Health as well being
Medicalised/scientised – a focus on the physical/chemical	Holistic – physical, mental and emotional, social, spiritual
Victim blaming	Social action or action competence focused

Pedagogical Approach

Teacher directed/transmission approach	Student centred/constructivist approach
Student passive in the learning process	Student active in the learning process
Aim: behaviour change	Aim: action competence
Moralistic/totalitarian – experts know what's best for us	Democratic/participatory – subjective dimension of well being and quality of life encouraged
Education 'about' health	Education 'for' health

Setting Approach

Focus just on classroom curriculum	Focus on whole school as well as classroom
Health promotion focus on health professionals perception of needs	Health promotion focus on students' perception of needs
School/society: medical professionals from society are used in the school and in the classroom	School/society: teachers and students are viewed as social agents in society

Assessment and Evaluation Approach

Measurement of behaviour change	Measurement of student competencies (critical thinking, process application, visions, commitment, involvement...)
---------------------------------	---

From: Tasker (1999 adapted from Jensen, 1997)

APPENDIX 3

Letters of Information and Consent

Ainslee Coates
26 Hartford Street
Burnside
Christchurch 8005
email: ainslee.coates@cce.ac.nz

5 August 2002

Teacher Name
School Name
School Address
Christchurch 8004

Dear Teacher,

Thank you for agreeing to consider your participation in my study that will investigate teachers' perspectives on implementing an aspect of the Health Education Curriculum. This research is part of my study towards a Master of Teaching and Learning degree at the Christchurch College of Education. The research is being supervised by Missy Morton and Gillian Tasker who are both lecturers experienced in research at the Christchurch College of Education.

The general aim of my study is to explore teachers' perspectives on implementing change, loss and grief in *Health and Physical Education in the New Zealand Curriculum (1999)* and to examine how this is implemented in the classroom. It is also anticipated that the research will provide insights that can assist teacher professional development.

I would very much like to include you and your class in my research. This would involve an initial interview with you of no more than 1 hour and then time spent interacting with the children in the normal classroom setting. This is to enable me to establish rapport with the children so that the impact of my presence during the research will be minimised. You would then plan, teach and implement a unit of work on change, loss and grief in the classroom at your convenience. I will be a participant observer for at least three lessons in the classroom. An interview of 1 hour following the teaching programme will complete the research process.

Participation in this research will provide you with the opportunity to reflect on your planning and teaching in this relatively new area of the Health Education Curriculum. Feedback will be given following the research that will assist your school to review their teaching and learning programmes in change, loss and grief.

Any information provided either in the interview or as part of the classroom observations will remain confidential. The information provided will be stored in a secure location, available

only to my College supervisors and myself and will be used for illustrative purposes only. Any quotations used in publication will be unattributable to you, the children in your class and the school. There is no apparent risk to you or the children in your class taking part in this research project and participation is voluntary. You or your school may withdraw from the research at any time without reason. A copy of the research report will be provided to you and the school once completed.

If you have any questions or complaints regarding this study I am willing to discuss these with you, or alternatively you may contact the following person:

The Chair
Ethical Clearance Committee
Christchurch College of Education
PO Box 31-065
Christchurch
Phone: (03) 348 2059

If you choose to participate in this study, please complete the consent form attached and return in the self addressed envelope enclosed by **Friday 27 August.** I will be out of the country on annual leave until 18 October but will be in touch with you immediately upon my return.

Yours sincerely

Ainslee Coates

Supervisors:

Gillian Tasker
Christchurch College of Education
Tel: 3482 059 ext 8412

Missy Morton
Christchurch College of Education
Tel: 3482 059 ext 8312

Consent Form For Participants

A Case Study of Curriculum Implementation: Change, Loss and Grief in '*Health and Physical Education in the New Zealand Curriculum*'

I understand that by participating in this study, I agree to:

- An individual interview that will last no longer than 60 minutes
- The interview being audio-taped and transcribed
- Allow Ainslee to spend time in the classroom prior to the teaching of the unit getting to know the children
- Plan, teach and implement a unit of work on change, loss and grief with my class at a time that is convenient to me and to the researcher
- Allow Ainslee to observe me in the classroom during at least 3 lessons on the unit change, loss and grief
- A follow up interview of no longer than 60 mins, following the classroom observation

I understand that by being involved as a participant in this study:

- I can withdraw from the study at any time including the withdrawal of any information I have provided
- My participation is voluntary
- The data I give will be treated confidentially
- The data I give will be retained for 2 years during which time it may be used by the researcher for any conference papers, journal articles or reports
- My anonymity will be preserved ie. my name will not be published or attributed to any quotes or comments used in the publication. Pseudonyms will be used where appropriate
- All information will be stored securely and available only to the researcher, the transcriber and the supervisors.

Name: _____

Address: _____

Signed: _____ Date: _____

APPENDIX 4

The Planned Curriculum: Jan's Unit Plan

School Unit Plan

Unit Title: *change, loss, grief*

Duration: *2 wks*

Essential Learning Area: <i>Health</i>	Other Areas Assessed: <i></i>
---	----------------------------------

Strand: *Mental Health*

Level: *1 (y0-2)*

Date: *T 3 2022*

School Goals: • <i>make responsible decisions about their own and others safety</i> • <i>have a positive view of our self with</i>	ICT Component: <i>/</i>
--	----------------------------

Unit Aim: *Students will develop an understanding of change, loss, grief and learn a variety of strategies to enable them to cope with their own C & G, help others who need support and build both individually and collectively a caring, supportive environment.*

Achievement Objectives: <i>1 A 1</i> <i>1 C 2</i> <i>1 C 3</i> <i>1 D 1/2/3</i> <i>2 A 1</i> <i>2 C 2/3/1</i> <i>2 D 1</i>	Concepts (PW/H) Processes (SS) <i>See over</i>
---	---

Essential Skills, Attitudes, Values: Communication Social and co-operative Numeracy Physical Work and Study Information Problem Solving Self Management Honesty Tolerance Fairness Reliability Respect for others/the law Caring & Compassion Non-sexism	Maori Component: <i>Maori Journal Stories</i>
---	--

Essential Skill to be Assessed - *Develops constructive approaches to challenge, change, share, conflict, competition, success, failure*

Learning Outcomes (Highlight Outcomes to be Assessed):
See over

Assessment Activities:
See over

Resources:
Curriculum in Action
Book list

Planned by:

Health and Physical Education in the New Zealand Curriculum

Unit Topic *Change, Grief, Loss*
Class: *Yr 0-2*

Unit Aim *Students will develop an understanding of CGL - develop strategies to help themselves - others cope while building a caring-supportive environment around them.*

Achievement Levels & Objectives

Strand A	
Personal health and physical development	Level <i>1, 2</i> Obj <i>A1, A4</i>
Strand B	
Movement concepts and motor skills	Level <i></i> Obj <i></i>
Strand C	
Relationships with other people	Level <i>1/2</i> Obj <i>C1, C3</i>
Strand D	
Healthy communities and environments	Level <i>1</i> Obj <i>D1, 2, 3</i>

Underlying Concepts

Hauora Contributing to students own well-being by developing an understanding of what change, loss, grief means
Health Promotion Developing a range of safe strategies - practices for themselves and others
Socio-ecological perspective Identifying & recognising different choices, behaviours and understanding need for mutual care and responsibility
Attitudes and Values Showing responsibility and care for the well-being of themselves and others

Key Area of Learning *Mental Health*

Specific Learning Outcomes Students will:

make 'feel charts' + describe their changes / losses / gains that take place as a natural development.
complete 'feelings' chart with captions / colours to demonstrate understanding of emotions
Roleplay / discuss scenarios of Maki, Melanie, Dan identifying safe ways to express feelings of grief
use stories (anecdotes) as a starter to roleplay ways of helping friends who are grieving
make a chart for classroom use
make a display of body shapes linking arms to demonstrate ways we can support each other

Strands and Achievement Objectives

2 A1
1 A1
2 A3
2 C1
1 D1/3

Essential Skills

Physical skills

Self management & competitive skills *Develop constructive approaches to challenge, change, stress, conflict*

Communication skills *competitor, success, failure*

Problem solving skills

Links with other subject areas

Resources, equipment and organisation

Curriculum in Action - Change - loss grief pg 22-30.

Assessment Methods linked to Achievement Objectives

peer assessment
teacher observation
self assessment

Change Grief and Loss Level one

Lesson one Understanding Change and Loss

What is change/loss ? – discuss how things change, what we lose and what we gain from change

Eg our taste in clothes, food, interests, what we could/couldn't do when young and now such as when little were pushed around in push chair but couldn't stay up late whereas now have to walk but are able to join in family evenings. Discuss loss and gain perspective

Activity

Make "feet charts" to show change either in family (Homework) or at school from Y0- Y8 and adults etc

Lesson two Understanding grief and disappointment

Read stories of loss. Questions - How did _____ feel when _____?
Make charts of words to describe feelings of grief.

Children to share own feelings of grief – when my pet died, when Grandad was sick, when I lost my, if my _____ died I would feel _____ etc

Activity

Complete feelings chart (see KOS booklet) - students to write appropriate captions/ talk about colours corresponding to feelings eg red for anger, black for moodiness etc

Discuss and share how everyone shows grief in different ways with no one way being "right". Some may feel cross, angry, non communicative, grumpy, sad tearful etc.

Lesson three – Coping with disappointment/loss and grief

Acknowledge and reaffirm that it is ok to feel a variety of feelings and the best way of dealing with D/L/G is to find out the best way of letting these feelings out safely.

Share ways of expressing feelings

Talking crying shouting

Throwing running thinking about something else

Share - if I am angry _____ helps me

 If I feel sad _____ helps me

When I feel mixed up _____ helps me

Discuss how we all have times when we feel disappointed but each time there is always something else, perhaps even better, coming along. Discuss times when

this has happened – I really wanted a _____ for my birthday but instead I got a _____ which I now think is much more fun even though I was disappointed at first.

Activity

Use group scenarios “ Matiu, Melanie and Dan “ pg26/27 to answer and share

Lesson four Helping others who are grieving

Share as a group – how people have helped them when they were sad and grieving about a loss

Reread Melanie and Dan stories sharing in pairs how you could help them if you were their friends. Try other possible scenarios –

Losing a favourite toy changing schools moving house
Death of a pet not receiving a special gift you were expecting
Death of a family member arrival of new family member
Failure eg missing out, not being chosen etc

Activity

Use the above for roleplay situations

Make chart showing things friends could do to help-

Listening hugging entertaining

Reassuring keeping them company

Lesson five Building a Supportive environment

Talk about how in life we will all continually experience various forms of grief, loss and disappointment in varying degrees and to do this we need to be able to both give and receive support – from a small word of encouragement to being there for someone 24 hours a day.

This is an ongoing and sharing responsibility for us all

Activity

Make body shapes with linking arms and on arms write various words from our chart to demonstrate how we can support each other.

APPENDIX 5

The Planned Curriculum: Hazel's Unit Plan

(removed to protect anonymity)